FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

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1. Corporation Name

WCG COMMUNICATIONS, INC.

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90081 034 ***150.00

WCG COMMUNICATIONS, INC.					
Principal Place of Business	Mailing Address	3 ** 3 5 5 5	Mar 10, 1199 884.	\$. pd 1	
1 Bethany Road. Ste. 76 Hazlet nj 07730	1 BETHANY ROAD. STE. 76 HAZLET NJ 07730	• • •	DO NOT WRITE IN THIS SPACE		
			 Date Incorporated or Qualified 03/30/1998 		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	26		22-3407789	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 24 25	Zip	Country 30	This corporation owes the current year li Personal Property Tax.	ntangible ☐ Yes ☐ No	
9. Name and Address of Curre			10. Name and Address of New Registered	d Agent	
BLANTON, EDWIN F 825 THOMASVILLE RD. TALLAHASSEE FL 32303		81 Name 82 Street Add 83	Iress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.05	FOO 1 CO 7 1509 Florido Statuto	84 City	F		
 Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig 	e of Florida. Such change was au	nonzea by the corporati	ion's board of directors. I hereby accept the app	ointment as registered	
SIGNATURE	cost and title if applicable (NOTE: 6	Registered Agent signature requir	ed when reinstating) DATE		

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered agent and title if a	policable. (NOTE:	Registered Agent signature required	when reinstating)	DATE			
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	C	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition		
NAME	MORGADO, ROBERT		1.2 NAME					
STREET ADDRESS	1 BETHANY ROAD, STE. 76		1.3 STREET ADDRESS					
CITY-ST-ZIP	HAZLET NJ 07730		1.4 CITY-ST-ZIP			_		
TITLE	DP	DELETE	2.1 TITLE		☐ Change	Addition		
NAME	WANG, PETER		2.2 NAME					
STREET ADDRESS	1 BETHANY ROAD, STE. 76		2.3 STREET ADDRESS					
CITY-ST-ZIP	HAZLET NJ 07730	L	2.4 CITY-ST-ZIP					
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition		
NAME	MU, SIMON		3.2 NAME		•			
STREET ADDRESS	1 BETHANY ROAD, STE. 76		3.3 STREET ADDRESS					
CITY-ST-ZIP	HAZLET NJ 07730		3.4. CITY-ST-ZIP					
TITLE	V	DELETE	4.1 TTLE		☐ Change	☐ Addition		
NAME	BUCKLEY, MATTHEW		4. 2 NAME					
STREET ADDRESS	1 BETHANY ROAD, STE. 76		4.3 STREET ADDRESS					
CITY+ST-ZIP	HAZLET NJ 07730		4.4 CITY-ST-ZIP					
TITLE	S	☐ DELETE	5.1 TITLE		Change	Addition		
NAME	ANSTATT, KATHLEEN		5.2 NAME	•				
STREET ADDRESS	1 BETHANY ROAD, STE. 76		5.3 STREET ADDRESS					
CITY-ST-ZIP	HAZLET NJ 07730		5.4 CITY-ST-ZIP			F A 4-00		
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition		
NAME			6.2 NAME			-		
STREET ADDRESS		1	6.3 STREET ADDRESS			•		
CITY-ST-ZIP			6.4 CITY-ST-ZiP	testion 440 07/2)/i). Eleride Statuton	t f . the english the state of the state of	f- mation		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address with all other the empowered.

SIGNATURE:

3/29/99 · 732/888-1645

3R2E034 (11/98)