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

PROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K47127

(1)

DESIGN COMMUNICATIONS GROUP, INC.

Principal Plac 2855 N. OCEA #300 RIVIERA BEAC		Mailing Address 2655 N. OCEAN DR #300 RIVIERA BEACH FL 33404-41	793		
				3. Date Incorporated or Qualified 11/23/1988	3a. Date of Last Report 02/13/1996
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number 65-0103647	Applied For Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 3	Country 0		Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
	LAND, DENISE	V. Donald Hile	81 Name	V. Donald Hile	ey .
	O'N, PLOMIDA MANGO ROAD		82 Street Ac	dress (P.O. box Number is Not Acceptable	
WEST PACK BEACH FL 33409			/	soo prospenty	larm road
			83	Suite 204	
ł			84 OD	M Beach Gardens	FL 85 35410
44 Diversal	to the provisions of Sections 607 050	2 and 607 1508 Florida Statutos	The above remed of		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the only alions of Section 607.0505, I provide Statutes.					
1	in tarnillar with, and the copt the dolly a	alions of Section 607,0505, Florid	a Statutes.	()). [1
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable NOTE.	agmered Agent signature re	wired when kinslating)	DATE
12.	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME	KALLAND, MICHAEL		1.2 NAME		
STREET ADDRESS	2655 N. OCEAN DR STE 300		1.3 STREET ADDRESS		
CITY-ST-ZIP	RIVIERA BEACH FL 33404		1.4 CITY - ST - ZIP		
TITLE	VST	☐ DELETE	2.1 TITLE		Change Addition
NAME	KALLARD, DENISE		22 NAME		
STREET ADDRESS	2655 N. OCEAN DR. STE 300		2.3 STREET ADDRESS		
CITY-ST-ZIP	RIVIERA BEACH FL 33404		2.4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	•		3.3 STREET ADDRESS		
CITY-ST-ZIP			.3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change L Add Ou

14. I do 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 his receiver or trustee employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter, or on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CHTY-ST-ZIP

5.4 CITY-ST-ZIP

TITUE NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

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May 30 1997 8:00am

Secretary of State

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