SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

TO KAPIAN

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham 97 AUG 27 PM 3:50 **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1997 SECRETARY OF STATE TALLAHASSEF FLORIDA DOCUMENT # (2) L89772 INTEGRITY COMMUNICATIONS, INC. Principal Place of Business Mailing Address 330 S.E. 20TH AVE 330 S.E. 20TH AVENUE **STE 422** STE 422 DEERFIELD FL 33441 DO NOT WRITE IN THIS SPACE DEERFIELD BEACH FL 33441 3. Date Incorporated or Qualified 3a. Date of Last Report 07/30/1990 02/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0208007 Not Applicable Same AS above 26 Same as reove Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. X Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent KAPLAN, JAY 81 Samo a.bsvc a 5 330 SE 20TH AVENUE 62 Street Address (P.O. Box Number is Not Acceptable) **SUITE 422 DEERFIELD BEACH FL 33441** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, 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 obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) typed or printed name of registered agent and little if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition ☐ Change TITLE 1.1 11148 KAPLAN, JAY NAME 1.2 NAME 2000022**7983**2--4 -08/28/97-01078-001 ****165.00 *****165.00 330 SE 20TH AVENUE, SUITE 422 STREET ADDRESS 1.3 STREET ADDRESS **DEERFIELD BEACH FL** CITY-ST-ZIP 14 CITY - ST - ZIF DELETE TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE STREET ADDRESS TREET ADDRESS ITY-ST-ZIP CITY-ST-ZIP TITLE DELETE Change Addition ME NAME RELIADORESS STREET ADDRESS Y - ST - ZIP CITY-ST-Z DELETE 5. Change ☐ Addition TITLE lιε NAME AME STREET ADDRESS IREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELFTE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-S1-ZIP 6.4 CHY-ST-ZIP 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 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.

0/2/07

(4/97)