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

CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS				Secretary of State		
1. Corporat		, , , , , , , , , , , , , , , , , , ,				
CONC	EPT COMMUNIQUES, INC.			E TARONDON SER MORE MORE CONTROLLED	Manas manas manas manas manas manas d	46)
						. 13):
Principal Place of Business Mailing Address				a papriikti cia lioid filas libita kilia kilia	milli asmit menit binst ninit asmit t	83 1
SUITE 2	FEDERAL HIGHWAY	5200 NORTH FEDERAL HI SUITE 2	GHWAT			
FT. LAUDER	DALE FL 33308	FT. LAUDERDALE FL 3330	08-3249	3. Date Incorporated or Qualified	3a. Date of Last Report	
				11/01/1985	04/19/1996	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied	For
21 Suite, Ap	F. H. who	Suite, Apt. #, etc.		59-2601809	Not App	
22 Suite, Ap	ι. #, θις.	Suite, Apr. #, etc.		5. Certificate of Status Desired	\$8.75 Addition	
City & St	ate	City & State		6. Election Campaign Financing	\$5.00 May	
23		28	r	Trust Fund Contribution	Added to Fee	es
7ip 24	Country 25	Zip 29	Country 30	This corporation has liability for in Florida Statutes	ntangible tax under s. 199. Yes ☐ No	032,
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Re	pistered Agent	
	RMER, ROBERT		81 Name			
5200 NORTH FEDERAL HIGHWAY SUITE 2			B2 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
	I. LAUDERDALE FL 33308		83		- <u>,</u>	
• •	. Diodelibres i E occor		84 City		1-11 To Octo	
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		FL 85 Zip Code	
11. Pursuar	it to the provisions of Sections 607.0 registered agent, or both, in the Sta	502 and 607 1508, Florida Statut	es, the above-named cor	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its regi	istered tered
agent I	am familiar with, and accept the ob	ligations of, Section 607.0505, Fi	orida Statutes.			
SIGNATURE	Signature, typed or pented name of registered	agent and title if applicable. (NOT	E: Registered Agent signature requ	red when reinstating)	DATE	
12,		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC		
TILLE	CTD FARMER, ROBERT	☐ DELETE	1.1 TITLE		Change	Addition
NAME STREET ADDRESS	PAGE MARCH PERFORM I THAT	Y 2	1.2 NAME			
CITY - ST-ZIP	FT. LAUDERDALE FL	, .	1.3 STREET ADDRESS			
TileF	PSD	DELETE	2.1 TITLE		Change	Addition
NAME:	FARMER, LINDA D.		2.2 NAME			
STREET ADDRESS		Y 2	2.3 STREET ADDRESS			
CHY-ST-ZIP	FT. LAUDERDALE FL	T priere	2. 4 CHTY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·		Kiring .
TOTALE	{	DELETE	3.1 TITLE 3.2 NAME		Change	Addition
NAME STREET ADDRESS	. }		3.2 NAME 3.3 STREET ADDRESS			
CHY-ST ZIP	9		3.4 City-St-Zip			
THIE		DELETE	4.1 TITLE		Change	Addition
NAME			4 2 NAME			
STREET ADDRESS	5		4.3 STREET ADDRESS			
CITY-S1-ZIP		- De. er-	4.4 CITY-ST-ZIP			0.1425
TELLE		☐ DELETE	5.1 TITLE		☐ Change ☐	Addition
NAME Proces apposes			5.2 NAME			
STREET ADDRESS City - S1 - Zip	? {		5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
THE		DELETE	6.1 TITLE	······································	Change	Addition
NAME		**	6.2 NAME		-	
PTO: CLAIV/direc			6.3 STREET ADDRESS			
STREET ADORES	·)		0.3 STITLET ADDRESS			

14. I do hereby certily that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi), 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 chapted or on an attachment with an address.

SIGNATURE:

When Roseer FARMER TURE AND TYPED OF PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

May 02 1997 8:00am