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

PROFIT

Apr 22 1998 8:00am **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **1998** DIVISION OF CORPORATIONS DOCUMENT # P17900 (2)**CUNNINGHAM COMMUNICATIONS, INC.** Principal Place of Business Mailing Address 1450 NW 1ST AVE 1450 NW 1ST AVE **BOCA RATON FL 33432 BOCA RATON FL 33432** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/04/1988 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 52-1379081 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 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. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CUNNINGHAM, P. RODNEY 1450 N.W. 1ST AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 **BOCA RATON FL 33432** 83 Zip Code 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 obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pointed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition **CUNNINGHAM, P. RODNEY** NAME 1.2 NAME 1450 NW 1ST AVENUE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE CUNNINGHAM, P. RODNEY NAME 2.2 NAME 1450 NW 1ST AVENUE STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change 4 1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 chartogy, or an an attachment with an address.

ELORIDA DEPARTMENT DE STATE

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