FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P40942 (5)

1. Corporation Name
COMMUNICATIONS BUYING GROUP, INC.

Principal Place of Business	Mailing Address
LAKEPOINT OFFICE PARK 3201 ENTERPRISE PKWY., STE. 190 CLEVELAND OH 44122	LAKEPOINT OFFICE PARK 3201 ENTERPRISE PKWY., STE. 190 CLEVELAND OH 44122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/07/1992	3a. Date of Last Report: 03/16/1994
4. FEI Number: 34-1623213	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21: Same	26: Same
22: Suite, Apt. #, etc	27: Suite, Apt. #, etc
23: City & State	28: City & State
24: Zip / 25: County	29: Zip / 30: County

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City: FL 05 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 _____ 5/27/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	11 TITLE	☐ Change ☐ Addition
NAME	ABBEY, STEPHEN P.	12 NAME	400001520404
STREET ADDRESS	35000 SHAKER BLVD.	13 STREET ADDRESS	-06/22/95--01037--019
CITY-ST-ZIP	HUNTING VALLEY OH	14 CITY-ST-ZIP	****200.00 ****200.00
TITLE	VSD	21 TITLE	☐ Change ☐ Addition
NAME	KRINSKY, MARK A.	22 NAME	
STREET ADDRESS	6261 TOURELLE	23 STREET ADDRESS	
CITY-ST-ZIP	HIGHLAND HEIGHTS OH	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	SHUROW, FRED	32 NAME	
STREET ADDRESS	5454 GAILBRATH RD.	33 STREET ADDRESS	
CITY-ST-ZIP	CINCINNATI OH	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	HALPER, STEVE	42 NAME	
STREET ADDRESS	9000 PLAINFIELD	43 STREET ADDRESS	
CITY-ST-ZIP	CINCINNATI OH	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	REMITTED BY MAY 1
STREET ADDRESS	TLS 6/21/95	63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: _____ 5/27/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0480317 FP