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.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P40942

(5)

COMMUNICATIONS BUYING GROUP, INC.

.....

FILED Sep 03 1997 8:00am Secretary of State



Principal Place	e or business	Mailing Address				
		LAKEPOINT OFFICE PARK	TF 400			
3201 ENTERPRISE PKWY., STE. 190 CLEVELAND OH 44122		3201 ENTERPRISE PKWY STE. 190 CLEVELAND OH 44122		DO NOT WRITE	DO NOT WRITE IN THIS SPACE	
VECTEDATO O	11 44/22	OCCUCIONO ON THIS		3. Date Incorporated or Qualified	3a. Date of Last Report	
				10/07/1992	06/18/1996	
2. Principal Pl	lace of Business	2a. Mailing Address	, 0,	4. FEI Number	Applied For	
21 <i>1313</i> 0	i Chagain bha.	28. Mailing Address 26 23230 WW	vin blud	. 34-1623213	Not Applicable	
Suite, Apt.	#. ac. 0	27 510 100Y	~	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	lland . Ohiv	City & State Cand	onio	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	17. Country IX-A	7 Zip 111177	Country (1/ /	8. This corporation owes or has pai		
24 441	25 V) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	29 44166 30		Personal Property Tax due June		
O I OUTFORMION STOLEM						
C/O CT CORPORATION SYSTEM			82 Street Address (P.O. Box Number is Not Acceptable)			
1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324			83			
FLA	NIKIION FE 33324					
			84 City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-pamed 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, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	PTD	Z Z OELETE	1.1 TITLE	R to al B a silve	Change X Addition	
NAME	ABBEY, STEPHEN P.	′	1.2 NAME	hobert B. Dally 7675 Foxgate Lane	<i>'</i>	
STREET ADDRESS	35000 SHAKER BLVD.		1.3 STREET ADDRESS	7675 LOXBATE WINE		
CITY-ST-ZIP	HUNTING VALLEY OH		1.4 CITY - ST - ZIP	anannati, Onio 4524	6	
TITLE	VSD	DA DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	KRINSKY, MARK A.	′	22 NAME	Nancy G. Aubin	/	
STREET ADDRESS	6261 TOURELLE		23 STREET ADDRESS	13291 Bremerton House		
CITY-ST-ZIP	HIGHLAND HEIGHTS OH		2 4 CITY-ST-ZIP	Pepper Pike, Ohio 44	124	
TITLE	D	DELETE DELETE	3.1 TITLE	r, · ·	Observe NW Address	
NAME	SHUROW, FRED	′	3 2 NAME	Ruthaniel Hawthorne 11690 Showshoe Trail	-	
STREET ADDRESS	5454 GAILBRATH RD.	,	3 3 STHEET ADDRESS	1650 5100 3 NC 1701	uaaa	
CITY-ST-ZIP	CINCINNATI OH		3.4. CITY-ST-7IP	Chagrin Falks, Ohio 4		
TITLE	U HAIDED CTOP	DELETE	4.1 TITLE		L. Change L. Addition	
NAME	HALPER, STEVE	1	4. 2 NAME			
STREET ADDRESS	9000 PLAINFIELD CINCINNATI OH		4.3 STREET ADDRESS			
CITY-ST-ZIP	CHOIMANI OI	DELETE	4.4 City-S1-ZiP		Dhanes I Ladren	
TITLE		ב_] מנונונ	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition	
NAME			6.2 NAME		□ Cuange □ Modillott	
STREET ADDRESS						
CITY-ST-ZIP			6.3 STREET ADDRESS			
14. I do héreb	y certify that the information supplied	with this filing does not qualify for	6.4 CITY-ST-ZIP or the exemption s	Lated 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.						