

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
97 SEP 19 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P40942

1. Corporation Name Communications Buying Group, Inc.
Three Commerce Park Square, 5th Floor
23200 Chagrin Boulevard
Cleveland, Ohio 44122

Principal Place of Business
Three Commerce Park Square, 5th Floor
23200 Chagrin Boulevard
Cleveland, Ohio 44122

3. Date Incorporated or Qualified 10/07/92
3a. Date of Last Report 06/18/96

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Three Commerce Park Square	25 Three Commerce Park Square	34-1623213	Not Applicable
Suite, Apt. #, etc 5th Floor	Suite, Apt. #, etc 5th Floor		
22 23200 Chagrin Boulevard	27 23200 Chagrin Boulevard	5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
City & State	City & State	6. Election Campaign Financing	\$5.00 May Be Added to Fees
23 Cleveland, Ohio	28 Cleveland, Ohio	Trust Fund Contribution ☐	
Zip	Country	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☐ Yes ☒ No
24 44122	25 Cuyahoga		
	29 44122		
	30 Cuyahoga		

9. Name and Address of Current Registered Agent

CT Corporation System
c/o CT Corporation System
1200 South pine Island Road
Plantation, Florida 33324

10. Name and Address of New Registered Agent

81 Name	N/A
82 Street Address (P.O. Box Number is Not Acceptable)	
83	600002300176-5
	-09/22/97-01167-007
84 City	*****B1 25 *****B1.25

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 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	President/Treasurer/Director ☒ DELETE	1.1 TITLE	President/CEO and Director ☐ Change ☒ Addition
NAME	Stephen P. Abbey	1.2 NAME	Robert Daly
STREET ADDRESS	35000 Shaker Boulevard	1.3 STREET ADDRESS	Three Commerce Park Square, 5th Floor
CITY-ST-ZIP	Hunting Valley, Ohio	1.4 CITY-ST-ZIP	23200 Chagrin Boulevard
			Cleveland, Ohio 44122
TITLE	Vice President/Secretary/Director ☐ DELETE	2.1 TITLE	Executive Vice President/Secretary ☒ Change ☐ Addition
NAME	Mark A. Krinsky	2.2 NAME	Mark A. Krinsky and Director
STREET ADDRESS	6261 Tourelle	2.3 STREET ADDRESS	Three Commerce Park Square, 5th Floor
CITY-ST-ZIP	Highland Heights, Ohio	2.4 CITY-ST-ZIP	23200 Chagrin Boulevard
			Cleveland, Ohio 44122
TITLE	Director ☐ DELETE	3.1 TITLE	Chairman of the Board ☒ Change ☐ Addition
NAME	Fred Skurow	3.2 NAME	Fred Skurow
STREET ADDRESS	5454 Gailbrath Road	3.3 STREET ADDRESS	4870 Walnut Woods
CITY-ST-ZIP	Cincinnati, Ohio	3.4 CITY-ST-ZIP	Cincinnati, Ohio 45243
TITLE	Director ☐ DELETE	4.1 TITLE	Secretary and Director ☒ Change ☐ Addition
NAME	Steven Halper	4.2 NAME	Steven Halper
STREET ADDRESS	9000 Plainfield	4.3 STREET ADDRESS	9000 Plainfield
CITY-ST-ZIP	Cincinnati, Ohio 45236	4.4 CITY-ST-ZIP	Cincinnati, Ohio 45236
TITLE	☐ DELETE	5.1 TITLE	Director ☐ Change ☒ Addition
NAME		5.2 NAME	William C. Mulligan
STREET ADDRESS		5.3 STREET ADDRESS	1375 E. 9th Street, Suite 2700
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Cleveland, Ohio 44114
TITLE	☐ DELETE	6.1 TITLE	Director ☐ Change ☒ Addition
NAME	600002300176-5	6.2 NAME	David M. Browne
STREET ADDRESS	-09/22/97-01167-008	6.3 STREET ADDRESS	8650 Governors Hill Drive
CITY-ST-ZIP	*****B.75 *****B.75	6.4 CITY-ST-ZIP	Cincinnati, Ohio 45243*

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. *See Exhibit "A" for additional list of officers

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date _____ Daytime Phone # _____