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 AM 10:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000033549 (5)

1. Corporation Name
GF COMMUNICATIONS, INC.

Principal Place of Business	Mailing Address
9900 WEST SAMPLE ROAD STE. 300 CORAL SPRINGS FL	9900 WEST SAMPLE ROAD STE. 300 CORAL SPRINGS FL

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/07/1993
3a. Date of Last Report: 04/27/1994

2. Principal Place of Business	2a. Mailing Address
21 888 S. ANDREWS AVE	26 888 S. ANDREWS AVE
Suite, Apt. #, etc. 22 SUITE 205	Suite, Apt. #, etc. 27 SUITE 205
City & State 23 FT LAUDERDALE, FL	City & State 28 FT LAUDERDALE FL
Zip 24 33316 Country 25 USA	Zip 29 33316 Country 30 USA

4. FEI Number: 65-0423005 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~FRIEDLAND, CLIFFORD~~ ~~9900 WEST SAMPLE ROAD~~ ~~STE. 300~~ ~~CORAL SPRINGS FL~~	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 888 S. ANDREWS AVE 83 SUITE 205 84 City: FT LAUDERDALE FL 85 Zip Code: 33316

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 _____ DATE _____
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE		☑ Change ☐ Addition
NAME	FRIEDLAND, CLIFFORD	12 NAME		
STREET ADDRESS	9900 WEST SAMPLE ROAD STE. 300	13 STREET ADDRESS	888 S. ANDREWS AVE STE205	
CITY ST ZIP	CORAL SPRINGS FL	14 CITY ST ZIP	FT LAUDERDALE, FL 33316	
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	GLASSMAN, DAVID	22 NAME		
STREET ADDRESS	3024 NORTHEAST 49TH STREET	23 STREET ADDRESS		
CITY ST ZIP	FORT LAUDERDALE FL 33308	24 CITY ST ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		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		
STREET ADDRESS		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, added or deleted.

SIGNATURE: Clifford Friedland, President 4/25/95 5223300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Telephone Number)

0100108 CP