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** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1997 **DIVISION OF CORPORATIONS** DOCUMENT # P93000036503 (9) THE COMMUNICATIONS RESOURCE GROUP, INC. Principal Place of Business Mailing Address 9900 STIRLING RD. 9900 STIRLING RD. SUITE 202 **SUITE 202** COOPER CITY FL 33024 COOPER CITY FL 33024 3. (2. Principal Place of Business 2a. Mailing Address 4. 21 Suite, Apt. #, etc. Suite, Apt. #, etc. **5**. (22 City & State City & State **6**. E 23 28 Country Country Zip Zip 8. 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name COLODNY, JOHN D 9900 STIRLING RD. 82 Street Address (P.0 **SUITE 202 COOPER CITY FL 33024** 83 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's boagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when re 12. OFFICERS AND DIRECTORS 13. A DELETE TITLE 1.1 TITLE COLODNY, JOHN D 1.2 NAME NAME

9900 STIRLING RD., STE. 202

COOPER CITY FL 33024

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FILED Sep 08 1997 8:00am Secretary of State

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65-0414706		<u></u>	Applie	plicable
Certificate of Status Desired			5 Addi Requir	tional
Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
This corporation owes or has paid Personal Property Tax due June 3		ent year] Yes	Intangi No	
Name and Address of New Reg	istered A	gent		
O. Box Number is Not Acceptable	9)			
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	FL	85 Z	ip Code	€
submits this statement for the pu and of directors. I hereby accept				
DDITIONS/CHANGES TO OFFICE		DIRECT	ORS IN	12:
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CITY-ST-ZIP 6.4 CITY - ST-ZIP 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.

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