

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

0145007

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Apr 26, 1999 8:00 am**  
**Secretary of State**

04-26-1999 90298 020 \*\*\*150.00

DOCUMENT # P93000036503

1. Corporation Name

THE COMMUNICATIONS RESOURCE GROUP, INC.

Principal Place of Business

9900 STIRLING RD.  
SUITE 202  
COOPER CITY FL 33024

Mailing Address

9900 STIRLING RD.  
SUITE 202  
COOPER CITY FL 33024

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/20/1993

4. FEI Number

65-0414706

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 10242 N.W. 47th Street

Suite, Apt. #, etc.

22 Suite 1

City & State

23 Sunrise, FL

Zip

24 33351

Country

25 US

2a. Mailing Address

26 10242 N.W. 47th Street

Suite, Apt. #, etc.

27 Suite 1

City & State

28 Sunrise, FL

Zip

29 33351

Country

30 US

9. Name and Address of Current Registered Agent

COLODNY, JOHN D  
9900 STIRLING RD.  
SUITE 202  
COOPER CITY FL 33024

Address change →  
only

10. Name and Address of New Registered Agent

81 Name

COLODNY, JOHN D.

82 Street Address (P.O. Box Number is Not Acceptable)

10242 N.W. 47th Street

83 Suite 1

84 City Sunrise

FL

85 Zip Code 33351

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 John D. Colodny JOHN D. COLODNY

4/22/99

Signature, typed or printed name of registered agent and title if applicable.

(NOT: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME COLODNY, JOHN D

STREET ADDRESS 9900 STIRLING RD., STE. 202

CITY-ST-ZIP COOPER CITY FL 33024

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE: John D. Colodny, President

4/22/99

954-574-9990

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Jayline Phone #

CR2E034 (11/98)