

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P94000037752 (0)

1. Corporation Name

EXPRESS COMMUNICATIONS SUPPLY, INC.



Principal Place of Business

Mailing Address

1291 A SOUTH POWERLINE ROAD
 SUITE 105
 POMPANO BEACH FL 33069

3016 S OAKLAND FOREST DR
 STE 2906
 OAKLAND PARK FL 33309
 US

3. Date Incorporated or Qualified
05/19/1994

3a. Date of Last Report
08/11/1995

2. Principal Place of Business

2a. Mailing Address

21 **6770 EAST ROGERS CIRCLE**

26 **6770 EAST ROGERS CIRCLE**

4. FEI Number
65-0491605

Applied For
 Not Applicable

22 Suite, Apt #, etc

27 Suite, Apt #, etc

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

28 City & State

BOCA RATON FL

BOCA RATON FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip

25 Country

29 Zip

30 Country

33487

FLORIDA

33487

P.B.

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

MELITO, CHRIS J
3016 S OAKLAND FOREST DR
STE 2906
OAKLAND PARK FL 33309

81 Name

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

6770 EAST ROGERS CIRCLE

83

84 City

BOCA RATON

FL

85 Zip Code

33487

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 of Special Agent in Charge, Registered Agent and the Applicant

(NOTE: Registered Agent signature is required when changing)

(SEE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	* S.V.P.	1.1 TITLE	SECRETARY, V.P.
NAME	MELITO, CHRIS J	1.2 NAME	
STREET ADDRESS	3016 S OAKLAND FOREST DR 2906	1.3 STREET ADDRESS	
CITY - ST - ZIP	OAKLAND PARK FL	1.4 CITY - ST - ZIP	
TITLE	PRESIDENT	2.1 TITLE	
NAME	NEIL H. BADER	2.2 NAME	
STREET ADDRESS	1798 NEWPORT LAKE CIRCLE	2.3 STREET ADDRESS	
CITY - ST - ZIP	BOCA RATON FL 33496	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Neil H. Bader **NEIL H. BADER**

6/10/96

561 995 8851

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)