FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CÖRPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996 DIVISION OF CORPORATIONS P94000050953 (6) DOCUMENT # Corporation Name AMBA GROUP COMMUNICATIONS, INC. Principal Place of Business Mailing Address P.O. BOX 70702 3041 NW 43 ROAD TERRACE FT. LAUDERDALE FL 33307 SUITE 307 LAUDERDALE LAKES FL 33313 3. Date Incorporated or Qualified 07/11/1994 3a. Date of Last Report US 07/17/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0491049 Not Applicable 3041 NW 43 TERRACE 3041 NW 43 TERRACE 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. ₫ 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be AUDERDALE LAKES, FL LAUDERDAIE LAKES. Trust Fund Contribution Added to Fees 28 23 6. This corporation has liability for intangible tax under s 199.032, 33313 1) 3A Florida Statutes ☐ Yes ☐ No 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent R1 Name SIEGEL, BERNARD F. ESO Street Address (P.O. Box Number is Not Acceptable) 82 10723 SW 104 STREET 83 **MIAMI FL 33176** 85 Zip Code 84 City 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 tille if applicable.

NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. DELETE Change ☐ Addition 1 1 TITLE TITLE MBAATYO, AKPE A 1.2 NAME NAME 3041 NW 43RD TERRACE 1.3 STREET ADDRESS STREET ADDRESS LAUDERDALE FL LAUDERDALE LAKES, FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 2. 1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3. STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 800001956538 DELETE 4. 1 TITLE TITLE 42 NAME NAME -09/25/96--01063--019 4.3 STREET ADDRESS STREET ADDRESS ****233.75 ****233.75 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 5. 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 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)(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 certify 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 3 if changed, or on an attachment with an address.

SIGNATURE

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-30-96

954-677-9996

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