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 CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

COMMU	MENT # P94000 UNICATIONS CONSULTANTS	INTERNATIONAL, IN	C.		
Principal Place of Business Mailing Address					
11229 W ATLANTIC BLVD 10619 W ATLAN)		
STE 201 CORAL SPRINGS FL 33071		STE 238 CORAL SPRIGNS FL 33071		DO NOT WRITE	IN THIS SPACE
US		US		3. Date Incorporated or Qualified	3a. Date of Last Report
				07/05/1994	07/30/1996
2. Principal Pi	lace of Business	2a. Mailing Address		4. FE! Number	Applied For
21		26		65-0504415	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		T	\$9.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pa	
24	25	29	30	Personal Property Tax due June	- · - ·
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
DAF	RLINGTON, PATRICIA S		81 Name		
11229 W. ATLANTIC BLVD.			82 Street Addr	ess (P.O. Box Number is Not Acceptat	20)
#201			Sireet Addi	ess (F.O. Box Number is Not Acceptat	ne)
CORAL SPRINGS FL 33071			83	······································	
			84 City		FL 85 Zip Code
11. Pursuant i	to the provisions of Sections 607.0502	and 607,1508, Florida Statut	es, the above-named corp	oration submits this statement for the p	
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.					
1	in rainings which and accept the dibligat	iona di, abelian dar.obus, rii	orioa statutos.		į
SIGNATURE	Signature, typied or printed name of registered agen	and life if applicable (NOI	F Registered Agent's gnature require	ed when reinstation)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	DARLINGTON, PATRICIA S		1.2 NAME		• •
STREET ADDRESS	1 44606 NV ATLANTIO BLUB, HARA		1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33071		1.4 CITY-ST-Z#P		
TITLE	VS	DELETE	2.1 TITLE		Change Addition
NAME	DARLINGTON, HEADLEY		2.2 NAME	•	
STREET ADDRESS	44800 IN ATLANTIO DILIP ATP ANA		2 3 STREET ADDRESS		Ì
CITY-ST-ZIP	CORAL SPRIGNS FL		2 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME		- -	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		\
CITY-ST-ZIP			3.4. CITY-ST-ZIP		İ
TITLE		DELETE	4.1 HILE		Change Addition
NAME		<u>-</u>	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		}
CITY-ST-ZIP			4.4 CITY-ST-ZIP		İ
TITLE		DELETE	5.1 TITLE		Change Addition
NAME		W	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ţ
CITY-ST-ZIP TITLE		DELETE	54 CITY-ST-ZIP 61 TITLE		Change Addition
		C DECLIC	6.2 NAME		Change rosition
NAME PROFESSION					
STREET ADDRESS		1	6.3 STREET ADDRESS		
CITY-ST-ZIP	w carlify that the information supplied	with this liting door not eval	6.4 CITY-ST-ZIP	I in Section 119.07(3)(i), Florida Statute	s. I further certify that the
informatio	n indicated on this annual report or su	nolemental annual report is t	rue and accurate and that	my signature shall have the same legs	all effect as if made under path: that I
t am an of appears in	ficer or director of the corporation or to Block 12 or Block 13 it stigged, or to the state of t	n ecciver or trustee empow or an attachment with an add	vered to execute this report dress	t as required by Chapter 607, Florida S	itatutes; and that my name

CONSTRUCTION OF THE CONTROL OF THE C

(951) 341-3428

FILED

Sep 23 1997 8:00am

Secretary of State