## 5/2:

## 2001 UNIFORM BUSINESS REPORT (UBR)

P940000891419 DO@UMENT# 1. Entity Name

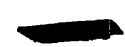
COMMUNICATIONS TEAM, INC

Principal Place of Business

SIGNATURE: 人

Mailing Address

2300 PALM BEACH LAKES BLVD #100



10 10 13

FILED

Jun 25, 2001 8:00 am

Secretary of State
05-22-2001 90050 028 \*\*\*150.00

WEST PALM BEACH, 7	2 33409			
		I AVE.		
Suite, Apt. #, etc. # 100	Suite, Apt. #, etc.		DO NOT WRITE IN THIS	SPACE
WEST PALM BEACH, FL	PB a FL		4. FEI Number 65-0551190	Applied For Not Applicable
<sup>Zip</sup> 3340 9 Country SA	Zip 33410	V.SA.	5. Certificate of Status Desired	\$8:75 Additional Fee Required
MARIA R. ARCE 5969 GOLVEN F	AGLE CIR	Name Street Address	7. Name and Address of New Registered s (P.O. Box Number is Not Acceptable)	Agant
PACH BEACH GARI		& City	FL	Zip Code
8. The above named entity submits this statement SIGNATURE Signature, typed or printed name of registered as	nt for the purpose of changing its re			
9. This corporation is eligible to satisfy its Intang Tax filing requirement and elects to do so.  (See criteria on back)  []	Make Check Payable	to Department of S	tate	\$5.00 May Be Added to Fees
TITLE ROCID PINCUS NAME STREET ADDRESS 9969 DAISY	DENS, FL 33410	12.  IITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Celete	NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition ?
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLÉ NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
<ol> <li>I hereby certify that the information supplied vindicated on this report or supplemental report of the corporation or the receiver or trustee en</li> </ol>	vith this filing does not qualify for th t is true and accurate and that my propered to execute this report as	ne exemption stated in S signature shall have the required by Chapter 60	section 119.07(3)(i), Florida Statutes. I further cert same legal effect as if made under oath; that I at 17, Florida Statules; and that my name appears in	ify that the information't an officer or director Block 11 or Block 12 if

ROCIO PIAICUS 4/28/01 (561) 62