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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000016116 (2)

COMMUNICATION SERVICES & SOLUTIONS, INC.

Principal Place of Business

Mailing Address

FILED Apr 15 1998 8:00am Secretary of State



1087 CRESTO			1087 CRESTDALE ST. JACKSONVILLE FL 32211					
anonooning.	L TE VELTI	VACACOTTI	LL FL SEEII			DO NOT WRITE IN THIS !	SPACE	
						 Date Incorporated or Qualified 02/27/1995 		
2. Principal Pl	ace of Business	2a, Mailing A	2a, Mailing Address			4. FEI Number	Applied For	
21		26	26			59-3299665	Not Applicable	
Suite, Apt. 6	♥, etc.	Suite, Ap	Suite, Apt. #, etc.				\$8.75 Additional	
22		27	27			5. Certificate of Status Desired	Fee Required	
City & State		City & Sta	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28	28			Trust Fund Contribution	Added to Fees	
Zip	Country Zip Ćo			Countr	у	a. This corporation owes or has paid the cur	rent year Intangible	
24	25	29	30			Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
BUSCHMAN, ALBERT E JR.				81	81 Name			
221	5 SO UTH 3RD ST.		82 Street Ad		Street	Address (P.O. Box Number is Not Acceptable)	<u> </u>	
	TE 101							
JAC	XSONVILLE BEACH FL 32250			83				
				84	City		85 Zip Code	
				09	City	FL	85 Zip Code	
11. Pursuant to	o the provisions of Sections 607.050	2 and 607 1508, F	orida Stat ute:	s, the abov	e-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 agreet and till of applicable (NOTE: Registered Agent signature required when reinstating) DATE								
12,	OFFICERS AN			13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	D	L	DELET E	1.1 TITLE			Change Addition	
NAME	BRANCH, JAMES B		1.2 N					
STREET ADDRESS	1087 CRESTDALE ST.		1.3 \$		ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32211			1.4 C/TY - 1	ST-ZIP			
TITLE	D'	L	DELETE	2.1 TITLE			☐ Change ☐ Addition	
NAME	BRANCH, AL DONA M			2.2 NAME				
STREET ADDRESS	1087 CRESTDALE ST.		2.3 S		ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32211		···	2. 4 CITY-	ST-ZIP			
TITLE		L	DELETE	3.1 TITLE	ľ		☐ Change ☐ Addition	
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP				3.4. CITY-	ST-ZIP			
TITLE			DELETE	4.1 TITLE			☐ Change ☐ Addition	
NAME				4. 2 NAME			İ	
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-5	ST-ZIP			
TITLE			DELETE	5.1 TITLE			☐ Change ☐ Addition	
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY-ST-ZIP				5.4 CITY - S	IT-ZIP			
TITLE .	7.		DELETE	6.1 TITLE			☐ Change ☐ Addition	
NAME				6.2 NAME	}			
STREET ADDRESS	÷ .			6.3 STREET	ADDRESS			
CITÝ-ST-ZIP	12			6.4 CITY - 5	1-ZIP			
	ertify that the information supplied w	ith this filma does r	not qualify for			d in Section 119.07(3)(i), Florida Statutes, I further cer	rtify 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.

Dramah