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



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

1996	DIVISION OF COI			
DOCUMENT # P950000	41433 (0)			
COMMUNICATION RESOURCES, INC.	T NACHERON NEO POLON ORINIA ORINIA DONIA	TOTAL BOTTA BLACK ALBAN BURGO MERG ANA ARRA		
Principal Place of Business Mailing Address				
2806 N.E. 12TH STREET 2806 N.E. 12TH STREET POMPANO BEACH FL 33062 POMPANO BEACH FL 33062				
		-	3. Date Incorporated or Qualified 05/25/1995	3a. Date of Last Report N/A
	Mailing Address	(1)	4. FEI Number	Applied For
21 1001 N W 62 5† 1007 26 Suite, Apt. #, etc	1001 N.W. Suite, Apt. #, etc	62 St.	65-0627723	Not Applicable \$8.75 Additional
22 3,00 27 City & State	# 200 City & State		5. Certificate of Status Desired	Fee Required
23 Ft. Laudirdale IFC 28 Zip Country		rdale, FL		\$5.00 May Be Added to Fees
24 33309 25 29	33309 30		This corporation has liability for Florida Statutes	Yes X No
9. Name and Address of Current Regis	tered Agent	81 Name	10. Name and Address of New Re	gistered Agent
Breit, Richard H 3111 Stirling D.			ess (P.O. Box Number is Not Acceptab	ole)
FT. LAUDERDALE FL 33312		83		
•		84 City		FL 85 Zip Code
 Pursuant to the provisions of Sections 607.0502 and 6 office or registered agent, or both, in the State of Floric 	07.1508, Florida Statutes	the above named corpo	ration submits this statement for the pr	urpose of changing its registered
agent. I am familiar with, and accept the obligations of	f, Section 607,0505, Florida	Statutes	ris board of directors. Thereby accept	the appointment as registered
SIGNATURE Signature Typed or printed name of registered agent and title	A OT 5			
12. OFFICERS AND DIREC		egistered Agent signature require	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE D	DELETE	117074.6		Change 🗶 Addition
NAME RETTSTADT, RICHARD		1.2 NAME G	eorge O'Leary	
STREET ADDRESS 2806 N.E. 12TH ST. CITY-ST-ZIP POMPANO BEACH FL 33062		1.3 STREET ADDRESS 3	eorge O'Leary 2812 Eldorado	
CITY-ST-ZIP PUMPANU BEACH FL 33062 TITLE	DELETE	14 CITY-SI-ZIP B	oca Raton, FL 334	87 Change Addition
NAME		22 NAME		Onatige Radulon
STREET ADDRESS		23 STREET ADDRESS		
CiTY - ST - ZIP		2 4 CITY-ST-ZIP		
TITLE	DELETE	3 1 TITLE		Change Addition
NAME STREET ADDRESS		3.2 NAME 3.3 STREET ADDRESS		
CITY-SI-ZIP		3 4 CITY - ST - ZIP		
TALE	DELETE	4.1 TITLE		Change Addition
NAME		4 2 NAME		
STREET ADDRESS		4 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	4.4 CiTY - ST - ZiP 5.1 TiTLE		Change
NAME	[] been	52 NAME		Change Addition
STREET ADDRESS		5.3 STREET ADORESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	5 4 CITY - ST - ZIP		
TITLE	DELETE	6 1 TITLE		Change Addition
NAME STREET ADDRESS		6 2 NAME 6 3 STREFT ADDRESS		
CITY-ST-ZIP		6 4 CITY - ST - ZIP		
14. I do hereby certify that the information supplied with th further certify that the information indicated on this ann made under oath, that I am an officer or director of the that my name appears in Block 12 לביים (1965).	iual report or supplemental corporation or the receive	hed and does not qualif l annual report is true ar r or trustee empowered	ad accurate and that my signature cha-	I have the come local effect as if
SIGNATURE: SGATURE OF TYPED OR PRINTED	NAME OF SIGNING OFFICER OR I	DIRECTOR	8/4/96	954-492-0022
STATISTICS ON PRINTED	Or GIGHING OFFICER ON I	ana cion	÷ uat:	Dinythto A Ethoria - #