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

Maling Address

CORPORATION ANNUAL REPORT

1996

Principal Place of Business

oath; that I am an officer or appears in Block 12 or Blo



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000045207 (4

MODERN CONCEPTS COMMUNICATIONS, INC.

1124 HIGHLAND BEACH DRIVE 1 1124 HIGHLAND BEACH DRIVE 1 HIGHLAND BEACH FL 33487 HIGHLAND BEACH FL 33487 3. Date Incorporated or Qualified 3a. Date of Last Report 06/06/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Apolied For 65-0610360 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box Trust Fund Contribution 23 28 Added to Fees Country Zip Country Zio 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MALLINGER, MARTIN R Street Address (P.O. Box Number is Not Acceptable) 82 4800 NO. FEDERAL HIGHWAY STE D-207 83 **BOCA RATON FL 33431-5178** 84 City 85 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1. 1 TITLE Change Addition NAM: CROUSE, RICHARD S 1.2 NAME 1217 WEST ROYAL PALM ROAD STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33486** CITY - ST - ZIP 1.4 CITY - ST- ZIP □ DELETE TILLS STD 2. 1 TITLE Change ☐ Addition MENDELSON, RICHARD N NAME 2.2 NAME 1124 HIGHLAND BEACH DRIVE STE 1 STREET ADDRESS 2.3 STREET ADDRESS HIGHLAND BEACH FL 33487 CITY - ST - ZIP 2.4 CITY - ST - ZIP DELETE. TITLE 3. 1 TITLE Change ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY - ST - ZIP 34 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change [] Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5 1 TITLE Change Addition NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CHTY - ST - ZIP 5.4 City - ST - ZIP TOTLE DELETE Change 6 1 TITLE ☐ Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Too 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 oath; that I am an officer or director of the proporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

PICHARD N. MENDELSON 4-16-96 407-272-1684 SIGNATURE:

CR2E034