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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000053507 (6)

COMMUNICATIONS RESEARCH GROUP, INC.

Feb 05 1998 8:00am Secretary of State

FILED

Principal Place of Business Mailing Address					i reaccedt vin taren dritt ander dater baret atred eren gren gener derift ides ides	
16410 SW 109 MIAMI FL 3319		16410 SW 109TH AVE MIAMI FL 33157				DO NOT WRITE IN THIS SPACE
US		US				3. Date Incorporated or Qualified
						07/12/1995
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				65-0592522 Not Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State)	City & State				Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🔲 Yes 🔲 No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent
THE	E Law firm of Lawrence J S	PIEGEL CHRTD		81	Name	e ·
	ALMERIA AVENUE			82	Street	et Address (P.O. Box Number is Not Acceptable)
CORAL GABLES FL 33134						
				83		
			F	B4	City	85 Zip Code
	_ <u>_</u>]			
agent. I an SIGNATURE	n familiar with, and accept the obliga	itions of, Section 607.0505, Flo	orida Statu	ites.		ad corporation submits this statement for the purpose of changing its registered or
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1.3 100	LF		Change Addition
NAME	remigio, silverio		1.2 NA	ME		
STREET ADDRESS	16410 SW 109TH AVE		1.3 STF	REFT A	ADDRESS	;
CITY-ST-ZIP	MIAMI FL	·····	1.4 CIT	Y - ST	· ZIP	
TITLE	DST	☐ DEL e te	2.1 TITI	LF		REMIGIO, NUVIA (lest name needs conection)
NAME	REMIGO, NUVIA		2.2 NA	ME		REMIGIO, NUVIA
STREET ADDRESS	16410 W SW 109TH AVE		23 518	EET A	ADDRESS	(lest name needs conection)
CITY-ST-ZIP	MIAMI FL		2.4 CH		r- ZIP	
TITLE		DELETE	3.1 TITI			Change Addition
NAME			3 2 NAM			
STREET ADDRESS			1		ADDRESS	;
TOLE	V.	DELETE	3.4. CIT		- ZIP	Change Addition
NAME		☐ DETEIE	4.1 JUL			Li Change Li Addition
j			4 2 NA		LO DO DECO	
STREET ADDRESS					ADDRESS	·
CITY-ST-ZIP TITLE		DELETE	4.4 CIT		- ZIP	Change Addition
NAME		La occeit	5.2 NAN			C orange D Addition
STREET ADDRESS			•		ADDRESS	,
CITY-ST-ZIP			535IN			
TITLE		DELETE	61 IN		- TIL.	Change Addition
NAME		board , as	6.2 NAM			La Constant
STREET ADDRESS			E		ADDRESS	
CITY-\$1-ZIP			6.4 Ci1			
	ertify that the information supplied wi	th this filing does not qualify fo				Lated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicatéd o officer or d	on this annual report or supplemental	annual report is true and acciver or trustee empowered to e	urate and	tha	t mv sic	ignature shall have the same legal effect as if made under oath; that I am an as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

- Illumy

Jan 131 198

305-252-3452