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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000054318	(7)

1. Corporation Name

C & W (COMMUNICATIONS INC.				
Principal Place of	of Business	Mailing Address			Blift Bill Bill Bill bill bill ber ber ber
5970 S.W. 18T		5970 S.W. 18T	h street		
SUITE 222	H SINCE!	SUITE 222			
BOCA RATON FL 33433 BOCA RATON FL 33433		FL 33433	3. Date Incorporated or Qualified 3a 07/13/1995	a. Date of Last Report	
2. Principal Plac	ce of Business	2a. Mailing Addr	ess	4. FEI Number 65-0593068	Applied For Not Applicable
Suite, Apt. #.	, etc.	Suite, Apt #	, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & Stale		6. Election Campaign Financing	\$5.00 May Be Added to Fees
23		28		Trust Fund Contribution 8. This corporation has liability for intar	Added to 1 ees
Zip	Country	Ζφ 1:5.1	Country	Florida Statutes	No
24	25	29	[30]	10. Name and Address of New Regis	
	9. Name and Address of Currer	it negistered Agent	81 Name		
	and make a transport	0E0 #10		MARK TRIEDLANDER	
	ATION CREATIONS ENTERPRIS	SES INC.	82 Street A	oddress (P.O. Box Number is Not Acceptable)	_
4521 PG			83	3770 3 7 7 3 3	
SUITE 21					lan Z- Code
PALM BE	EACH GARDENS FL 33418		84 City	CATALL	FL 85 Zip Code 33433
	607.0506	0 007 11 00 Elovis		rporation submits this statement for the purpose	a of changing its registered office
				poard of directors. Thereby accept the appoint	ment as registered agent. I am
familiar wit	h, and accept the obligations of, Sec	tion 607.0505, Florida	Statutes.		мин 6, 1996
SIGNATURE _		n aco tha hapal asée	NOTE Regioned Agent squares to	equired wher resistating).	
		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
12.	D		LETE 1 1 TITLE		☐ Change ☐ Addition
NAME	FRIEDLANDER, MARK J		1.2 NAME		75
STREET ADDRESS	% 5970 S.W. 18TH ST. #222	2	1.3 STREET ADDRESS		្រុំ
CITY-ST-ZIP	BOCA RATON FL 33433	_	1.4 C/1Y - ST - ZIP		
TITLE		DE	LETE 2 ! TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		ĺ
CITY-ST-ZIP			2 4 CITY - \$1 - ZIF		
TITLE		[] 0!	ELETE 3 1 THTLE .		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3. STREET ACCIPESS		
CITY-ST-ZIF			3.4 C TY ST-ZIP		FI Change FI Addition
TITLE		D	ELE1E 4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP			4.4 City - St - Zif		Change C Addition
TITLE			ELETE 5 1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	İ	
STREET ADDRESS			5.3 STRSET ADDRESS		
CITY-ST-ZIP			5 4 C 1Y - \$1 - ZIP		Chappe
TITLE			BELFTE BITTLE	80000175	Change Addition
NAME			6.2 NAME	-03/26/960103	21001
STREET ADDRESS			€ 3 STREET ADDRESS	***208.75	JI UUI
CITY:SF-ZIP			6 4 C-1Y - ST - ZIP		7/2/4/ Florida Statutae Lifurther

14. I do 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 corporation or the receiver or trusted empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: __

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 6, 1994 (407) 338-0311