

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUL 23 AM 10:16

DOCUMENT # P95000091435 (4)

1. Corporation Name

COMMUNICATIONS CONCEPTS INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

3801 NORTH UNIVERSITY DRIVE
SUITE 315
SUNRISE FL 33351

3801 NORTH UNIVERSITY DRIVE
SUITE 315
SUNRISE FL 33351

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 5440 NW 33RD AVE

2a. Mailing Address

26 5440 NW 33RD AVE

Suite, Apt. #, etc.

22 Ste 104

Suite, Apt. #, etc.

27 Ste 104

City & State

23 Ft. Lauderdale, FL

City & State

28 Ft. Lauderdale, FL

Zip

24 33309

County

25 Broward

Zip

29 33309

County

30 Broward

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLANCK, WARREN
3801 NORTH UNIVERSITY DRIVE
SUITE 315
SUNRISE FL 33351

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 William Gale, President

(NOTE: Registered Agent signature required when reinstating)

7/18/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME GALES, WILLIAM

STREET ADDRESS 3801 NORTH UNIVERSITY DRIVE, #315

CITY-ST-ZIP SUNRISE FL 33351

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

700002247567--0

-07/25/97--01030--008

****165.00 ****165.00

TITLE VSD ☐ DELETE

NAME BLANCK, WARREN

STREET ADDRESS 3801 NORTH UNIVERSITY DRIVE, #315

CITY-ST-ZIP SUNRISE FL 33351

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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.

SIGNATURE William Gale, President

7/18/97 954/407-1128

CR2E034 (4/97)