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Feb 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000043886 (6)

1. Corporation Name
A PLUS COMMUNICATIONS, INC.

Principal Place of Business
1 SE 3RD AVE SUITE 2100
MIAMI FL 33131

Mailing Address
1 SE 3RD AVE SUITE 2100
MIAMI FL 33131-1704



3. Date Incorporated or Qualified 05/15/1996	3a. Date of Last Report
4. FEI Number 65-0672749	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

WILLIAMS, THOMASINA H
2937 SW 27TH AVE SUITE 301
COCONUT GROVE FL 33133

10. Name and Address of New Registered Agent

81. Name

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

83.

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)

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	SHARPTON, DARYL	
STREET ADDRESS	1 SE 3RD AVE SUITE 2100	
CITY - ST - ZIP	MIAMI FL 33131	
TITLE	D	DELETE
NAME	BRUNSON, ANTHONY	
STREET ADDRESS	1 SE 3RD AVE SUITE 2100	
CITY - ST - ZIP	MIAMI FL 33131	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE	Change	Addition
12. NAME		
13. STREET ADDRESS		
14. CITY - ST - ZIP		
21. TITLE	Change	Addition
22. NAME		
23. STREET ADDRESS		
24. CITY - ST - ZIP		
31. TITLE	Change	Addition
32. NAME		
33. STREET ADDRESS		
34. CITY - ST - ZIP		
41. TITLE	Change	Addition
42. NAME		
43. STREET ADDRESS		
44. CITY - ST - ZIP		
51. TITLE	Change	Addition
52. NAME		
53. STREET ADDRESS		
54. CITY - ST - ZIP		
61. TITLE	Change	Addition
62. NAME		
63. STREET ADDRESS		
64. CITY - ST - ZIP		

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 from an attachment with an address.

SIGNATURE: _____ Vice President 2/6/96 (305) 374-1574
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)