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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000092018 (6)

CALL MANAGEMENT GROUP, INC.

FILED Jun 09 1997 8:00am Secretary of State



Principal Place of Business		Mailing Addre	Mailing Address				i tanisani iin iniih diiir aarit nesii nanii daria tarii 'aktar iinai laii inai				
600 FAIRWAY DRIVE STE 108		600 FAIRWAY DRIVE STE 108 DEERFIELD BEACH FL 33441-1883									
DEERFIELD BE	AOH FL 33441	ULERFIELD BI	EACH FL 33441-	1663							
						3. Date Incorporated (or Qualified	3a. Da	te of Last F	leport	
2. Principal Pi	ace of Business	2a. Mailing Address				4, FEI Number	4, FEI Number Apr			pplied For	1
21		26				65-0710228 Not Applicable				1	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			\$8.75 Additional		1	
22		27				5. Certificate of Status	Dosired	<i>y</i>	Fee Re	equired	
City & State		City & Stat	City & State			6. Election Campaign	Financing	_	\$5.00 May Be		
23	7.		28			Trust Fund Contribution					
Zip	Country	Zip	-	Country	,	8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No					
24	g Name and Address of Currer	29	30	l		Florida Statutes Yes You 10. Name and Address of New Registered Agent					1
000		II Uoðisteien víðal	<u> </u>	81	Name	10, Hamb end Addres	s of Man Del	Jistered A	gent		1
	DSS, HAROLD R			82]
	FAIRWAY DRIVE STE 108					of Address (P.O. Box Number is Not Acceptable)					1
DEE	RFIELD BEACH FL 33441			83							┨
1				["							
				84	City			FL	85 Zip	Code	
44 Pursuant	o the provisions of Sections 607.050	12 and 607 1508 Fi	orida Statutes it	lhe above	e-named (corporation submits this state	ent for the n		changing i	le registered	{
office or re	to the provisions of Sections 607.050 ogistered agent, or both, in the State	of Florida. Such ch	ange was auth	orized by	the corpo	oration's board of directors. If	nereby accep	the appo	pintment as	registered	
	m familiar with, and accept the oblig	ations of, Section by	J7.0505, FIORIDA	a Statutes	5.						
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable	(NOTE: Rev	nistered Ane	ent signature re	equired when rainstaling)		DATE			
12.		D DIRECTORS	I	13.		ADDITIONS/CHANG	S TO OFFIC		DIRECTOR	RS IN 12	19
TITLE	D		DELETE.	1.1 HTLE		DIRECTOR		-11	Change	Addition	18
NAME	GROSS, HAROLD R			1.2 NAME		ERIC M. COLE					3
STREET ADDRESS	6935 NW 5 AVE		1.3 STREET AL			4892 WILLOW DA	21 VE				Š
CITY-ST-ZIP	BOCA RATON FL 33487			1.4 CITY - S	11-21P	BOLA RATION FL	3348	7			Š
TITLE	D	×	DELETE	2.1 TITLE					Change	Addition	Ç
NAME	CAMERGON, ALEX-C	•		2.2 NAME							
STREET ADDRESS	2761 NW 112 AVE			23 STREET	ADDRESS						
CITY-ST-ZIP	CORAL SPRINGS FL 33085			2 4 CHY-5	ST-ZIP						1
TITLE			DEFEIE	3.1 TITLE	[Change	Addition	ļ
NAME				3.2 NAME							l
STREET ADDRESS	•			3.3 STREE1	ADDRESS	•					
OITY-ST-ZIP				3.4. CITY - 5	ST-ZIP						
TITLE			DELETE	4.1 TITLE					Change	Addition	l
NAME				4. 2 NAME.							
STREET ADDRESS				43 STREET	ADDRESS						
CITY-ST-ZIP				44 City-S	T-ZIP						
TITLE		Ц	DELETE	51 TITLE	-				∟ Change	Addition	ļ
NAME				5.2 NAME							1
STREET ADDRESS				5.3 STREET	ADDRESS						
CITY-ST-ZIP			05/575	5.4 CITY - S	T-ZIP						-
TITLE		Ц	DELETE	6.1 TITLE	-			ļ	Change	Addition	l
NAME	e Signature			6.2 NAME							
STREET ADDRESS				63 STREFT							
CITY-ST-ZIP	×1			6.4 CITY - S	T-71P						1

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.

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