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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthan

FILED Mar 10 1998 8:00am Secretary of State

	1998	DIVISION OF COR	RPORATIONS	Secretary	orstate
DOCUMENT # P9700032218 (4) NATIONAL COMMUNICATIONS MARKETING, INC.					
MATION	INC COMMUNICATIONS MAIN	INCTING, INO		T PROPIOSE THE PROPIOSE HOUR AND A CONTROL OF THE	A
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Principal Place		Mailing Address			
10631 MAPLE CHASE DR 10631 MAPLE CHASE DR BOCA RATON FL 33498				1	
			DO NOT WRITE IN T	'HIS SPACE	
			, <u>-</u>	3. Date Incorporated or Qualified 04/08/1997	
2. Principal Place of Business 21 90423 State Rd 7 26 20423 State			te Rd 7	4. FEI Number 65-0745299	Applied For Not Applicable
Suite, Apt. #, otc. Suite, Apt. #, otc. Suite, Apt. #, otc. Suite, Apt. #, otc. Z7 Suite 109			09	5. Certificate of Status Desired	Fee Required
City & State	/)	28 Boca Ruto	n, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 331	Last - Sountly B	1 33498 30 30 30 30 30 30 30 30 30 30 30 30 30	Country Beac	8. This corporation owes or has paid th	
24 05	9. Name and Address of Current	120	Palm Beac	Personal Property Tax due June 30. 10. Name and Address of New Register 10. Personal Property Tax due June 30.	Yes No
Lat 1	RRAY, THOMAS E	nogisterou Agent	81 Name	10. Hallo bita Adalosa of Hot Hogio.	//ou / John
MUNNAI, ITUMAS E			82 Street Addr	dress (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33498			62 Street Addr	ess (P.O. Box Number is Not Acceptable)	
•			83		
, ,			84 City		FL 85 Zip Code
11. Pursuant to	o the provisions of Puctions 607.0502	and 607.1508, Florida Statutes,	the above-named corp	poration submits this statement for the purpo	ose of changing its registered
office or re agent. I ar	egistered agent of both, in the State on familiar with and accept the obligat	of Florida. Such change was auth ions of, Section 607.0505, Florid	norized by the corporat la Statutes.	oration submits this statement for the purpoion's board of directors. I hereby accept the	appointment as registered
SIGNATURE .	Men				
	Signate typed or printed of the of regulational agent OF FICERS AND		ngistered Agent algnature requirements	ed when reinstating) D ADDITIONS/CHANGES TO OFFICERS	ATE S AND DIRECTORS IN 12
12.	D OTHERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	MURRAY, THOMAS E		1,2 NAME		
STREET ADDRESS	10631 MAPLE CHASE DR		1.3 STREET ADDRESS		}}
CITY-ST-ZIP	BOCA RATON FL 33498		1 4 CITY - ST - ZIP		
TITLE		DELETE	21 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREE1 ADDRESS		
CITY-ST-ZIP		DELETE	2.4 CHY-ST-ZIP 3.1 TITLE		Change Addition
TITLE NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	1		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Channa I Addition
TOTLE		DELETE	5.1 TITLE		Change Addition
NAME OTREET ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		۸.
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		Ì
CITY-ST-ZIP			64 CITY-S1-ZIP		
14. Lhereby c	ertify that the information supplied will	h Mariling does not qualify for the	he exemption stated in	Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information

4. I hereby confity that the information supplied with usual report of supplied with usual report or supplied with usual report or supplied with usual report or supplied 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 usual report 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.

SIGNATURE: