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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000098605 (3)

CEEBRAID-SIGNAL NHLPGP, INC.

FILED
Apr 15 1998 8:00am
Secretary of State

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								/	JET EIN IEN
Principal Place of Business Mailing Address									
	LIAN AVENUE SOUTH	250 AUSTRALIAN AVENUE	SOUTH						
SUITE 1003 SUITE 1003		SUITE 1003 WEST PALM BEAH FL 334	04			DO NOT WRITE IN THIS SPACE			
WEST PALM BEAH FL 33401 WEST PALM BEAH FL 3340		Ńι			3. Date Incorporated or Qualified				
						11/19/1997			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		As	pplied For
21		26				65-0196208	ζ	No	ot Applicable
		Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75	Additional	
22		27				5. Certificate of Status Desired		Fee Re	equired
City & State City & State					6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Count	ry		8. This corporation owes or has p	_		
24	25		101			Personal Property Tax due Jur 10. Name and Address of New F			_ No
4.41	g. Name and Address of Currer	nt Hegistered Agent	8	1 N	ame	10. Name and Address of New F	edistered	Agent	
	YMAN, DAVID M		ľ	' '`	aille				
	7 SOUTH FLAGLER DRIVE		8	2 S	reet Addre	ess (P.O. Box Number is Not Accept	able)		
	ITE 310E		8	2					
WE	EST PALM BEACH FL 33401		ľ	1					
			8	4 C	ly		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the abo	ve-na	med corpo	oration submits this statement for the	purpose of	f changing if	ts registered
office or r	egistered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was au	thorized I	oy the	corporation	on's board of directors. I hereby acc	ept the app	ointment as	registered
•	in termior with and dooopt the owng	1110/10 61, 8860011 661 (9660, 11011	au ololol						
SIGNATURE	Signature, typed or printed name of registered age	nt and little if applicable (NOTE:	Ragislared A	gent sig	nature require	od when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	D	☐ DELETE	1.1 TITLE		D			X Change	Addition
NAME	S CHLESINGE, JASON		1.2 NAM	Ξ	Ja	ason Schlesinger	=		
STREET ADDRESS	83 MORGAN STREET		1.3 STRE	ET ADD	ress /	12 Hoyt ST			
CITY-ST-ZIP	STAMFORD CT 06905		1.4 CITY		<u> </u>	12 Hoyt St tambre et 06905	· · · · · · · · · · · · · · · · · · ·		
TITLE	D	☐ DELETE	2.1 TITLE					Change	Addition
NAME			2.2 NAMI						
STREET ADDRESS	250 AUSTRALIAN AVENUE S		2.3 STRE	ET ADD	RESS				
CITY-ST-ZIP	WEST PALM BEAH FL 33401		2. 4 CITY	- ST - ZI	>				
TITLE		DELETE	3.1 TITLE					☐ Change	Addition
NAME			3.2 NAM		1				
STREET ADDRESS			3.3 STRE						
CITY-ST-ZIP		Dr. ere	3.4. CITY		2			04	Addition
TITLE		☐ DELE TE	4.1 TITLE					☐ Change	☐ Addition
NAME			4. 2 NAM						
STREET ADDRESS				et add	KESS				
CITY-ST-ZIP			4.3 STRE						
	'''' 	□ price	4.4 CITY					Change	Addition
TITLE		☐ DELETE	4.4 CITY 5.1 TITLE					Change	Addition
NAME		☐ DELETE	4.4 CITY 5.1 TITLE 5.2 NAME					Change	Addition
NAME STREET ADDRESS		☐ DELETE	4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE	ET ADD				Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE 5.4 CITY	ET ADD ST-ZIF				· ·	
NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE 5.4 CITY 6.1 TITLE	ET ADD ST-ZIF				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE 5.4 CITY	ET ADD St-Zir				· ·	

14. Thereby 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 riport 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 addet.

Teson Sphies in Florida Statutes.