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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000021341

1. Corporation Name

COMPLETE COMMUNICATIONS MARKETING & SOLUTION, IN

C. STATE OF THE PARTY OF THE PARTY

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90113 013 ***150.00



17					
Principal Place	of Business	Mailing Address			
	19.NORTH	29250 U.S. HWY 19 I LOT 232	NORTH		
CLEARWATER FL 33671 CLEARWATER FL 33671			571		DO NOT WRITE IN THIS SPACE
					3. Date incorporated or Qualifed
					03/04/1998
2. Principal Pl	ace of Business	2a. Mailing Address	i .		4. FEI Number Applied For
21		26			59-3499 A 7 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	3.		-5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be
23		28		 	Trust Fund Contribution Added to Fees
Žip	Country	Zip	Cou	ntry	8. This corporation owes the current year Intangible Personal Property Tax.
24	25	29	[30[,
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Registered Agent
ANDE	erson, anthony r		٠.		Spiegel & Utrera, P.A.
	0 U.S. HWY 19 NORTH	•	· `	82 Street	t Address (P.O. Box Number is Not Acceptable)
LOT				83	343 Almeria Ave
	RWATER FL 33671	÷		83	
			**	84 City	85 Zip Code
<u> </u>	The street of th	<u> </u>			Coral Gables FL 33134
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 On On On - Teffrey Dowd- Aty at Law 4/28/99					
	Signature, typed of hinter name of registered agent		(NOTE: Registered	Agent signature r	e required when refistating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE (D	□ DELE			, Cliange , Journal
NAME	LAVALLEE, USE T		1.2 NA		
STREET ADDRESS	306 ROUTE 219, LOT 79 WEST	0 101 411 0		REET ADDRESS	
CITY-ST-ZIP	W. HEMMINGFORD, QUEBEC O			ry-ST-ZIP	Change Addition
∃ <i>Π</i> ΙΕ	D	☐ DELE			
NAME .	AMSEL, DAVID L	050	2.2 NA		David Amsel 29250 us Hwy 19 N, Lot 232
STREET ADDRESS	2950 GLEN OAK AVENUE, LOT	250	•	REET ADDRESS	Clearwater FL 33671
CITY-ST-ZIP-	CLEARWATER FL 34619	DELE		TY-ST-ZIP	Clearwater, FL 33671
TITLE .	D ANDERSON ANTHONY I	, DELE			Olivinge Endulusi
NAME	ANDERSON, ANTHONY L	IDT 00	3.2 NA		
STREET ADDRESS	2545 N.E. COACHMAN ROAD, A	KF 1 93		REET ADDRESS	3
CITY-ST-ZIP	CLEARWATER FL 33765	DELE		TY-ST-ZIP	Change ★Addition
TITLE	•			LE	
NAME (4. 2 N	WE	James P. Mallon \$ 572 both Street S.
STREET ADDRESS				REET ADORESS	572 60 Street 3.
CITY-ST-ZIP		□ DELE		ry-st-zip	St. Peters Durg, FL 33/0/
TITLE			TE 5.1 TIT		□ Olishida □ Monton
NAME				REET ADORESS	9
STREET ADDRESS				ree : Address ry-ST-ZIP	1
CITY-ST-ZIP		DELE			☐ Change ☐ Addition
TILE [: DELE	6.2 NA		
NAME	•			REET ADDRESS	
STREET ADDRESS	•			KEE! AUURESS	1

14. I 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 supplied in the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee enpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an apaciment with an address, with an other like empowered.

SIGNATURE: