

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

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Jun 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V09799 (0)
1. Corporation Name
COOL HAND COMMUNICATIONS, INC.



Principal Place of Business Mailing Address
1098 N.W. BOCA RATON BLVD.
SUITE 1
BOCA RATON FL 33432
US
1098 N.W. BOCA RATON BLVD
SUITE 1
BOCA RATON FL 33432-2616
US

3. Date Incorporated or Qualified 01/27/1992
3a. Date of Last Report 02/12/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 10258 Vestal Manor Suite, Apt. #, etc.	26 10258 Vestal Manor Suite, Apt. #, etc.	65-0307686	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Coral Springs, FL	28 Coral Springs, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 33071 25 Broward	29 33071 30 Broward	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MALLINGER, MARTIN R
SANCTUARY CENTRE, SUITE D-207
4800 FEDERAL HIGHWAY
BOCA RATON FL 33431

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
980 N. Federal Highway, Suite 302
83
84 City Boca Raton, FL 85 Zip Code 33432

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent: signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	HEDRICK, CHRISTOPHER K.	
STREET ADDRESS	1098 N.W. BOCA RATON BLVD, STE. 1	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	HEDRICK, JOAN L	
STREET ADDRESS	1098 N.W. BOCA RATON BLVD, STE 1	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	10258 Vestal Manor	
1.4 CITY-ST-ZIP	Coral Springs, FL 33071	
2.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	10258 Vestal Manor	
2.4 CITY-ST-ZIP	Coral Springs, FL 33071	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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, or on an attachment with an address.

CR2E034 (9/96)