FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400001482634
-05/10/95--01062--022
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

1. Corporate Name

COMMUNICATIONS MANAGEMENT ENGINEERING, INC.

DOCUMENT # V46906 (6)

Mailing Address

830 NE 18TH ST
FT LAUDERDALE FL 33305

Principal Place of Business

830 NE 18TH ST
FT LAUDERDALE FL 33305

3. Date Incorporated or Qualified: 06/30/1992

3a. Date of Last Report: 07/27/1993

2. Mailing Address
21

2a. Principal Place of Business
26

4. FEI Number: 65-0342415 ☐ Applied For ☐ Not Applicable

Street Address, Apt. #, etc.
22

Street Address, Apt. #, etc.
27

5. Certificate of Status Desired: $8.75 Additional Fee Required ☐

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

City & State
23

City & State
28

7. Nonprofit Exempt from $138.75 Supplemental Fee ☐

Zip
24

County
25

Zip
29

County
30

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

BLOCK, MICHAEL
830 NE 18TH ST
FT LAUDERDALE FL 33305

10. Name and Address of New Registered Agent

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City FL 05 Zip Code

11. Pursuant to the provisions of Section 607.0505 and 617.0505, 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. I/We am/are familiar with, and accept the obligations of, Section 607.0505 or 617.0505, Florida Statutes.

SIGNATURE(S) OF CURRENT REGISTERED AGENT OR OFFICER OR DIRECTOR OF CORPORATION

DATE

12. OFFICERS AND DIRECTORS

D/S
BLOCK, MICHAEL
830 NE 18TH ST
FT LAUDERDALE FL

D/P
MILLER DONNA K
~~23 VIA DECA3U3 SUR, #205~~
~~BOYNTON BEACH FL 33426~~

13. CHANGES TO OFFICERS AND DIRECTORS IN 12

01 TITLE
02 NAME
03 STREET ADDRESS
04 CITY, ST, ZIP

01 TITLE
02 NAME
03 STREET ADDRESS
04 CITY, ST, ZIP
MM 31.1, US1, Box 553
BIG PINE KEY, FL 33043

01 TITLE
02 NAME
03 STREET ADDRESS
04 CITY, ST, ZIP

01 TITLE
02 NAME
03 STREET ADDRESS
04 CITY, ST, ZIP

01 TITLE
02 NAME
03 STREET ADDRESS
04 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is complete, accurate and not misleading. I further certify that the information indicated on this report or supplemental 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: michael block
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95
Date

(305)763-8326
Daytime Phone Number