

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **V47992 (5)**
1. Corporation Name
CG SALES ASSOCIATES, INC.



Principal Place of Business: **3435 N.W. 55TH ST. FORT LAUDERDALE FL 33309**
Mailing Address: **3435 N.W. 55TH ST. FORT LAUDERDALE FL 33309**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	777 So. State Rd 7	26	777 So. State Rd 7.	06/29/1992	07/20/1995
22	Suite E.	27	Suite E	4. FEI Number	Applied For / Not Applicable
23	Margate, Fl	28	Margate, Fl. 33068	65-0345357	
24	33068	29	33068	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25	U.S.A.	30	U.S.A.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
SABATINO, MICHAEL 3860 CORAL TREE CIRCLE APT. 307 COCONUT CREEK FL 33073				<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	
SABATINO, MICHAEL 3860 CORAL TREE CIRCLE APT. 307 COCONUT CREEK FL 33073				81 Name	Sabatino, Michael
				82 Street Address (P.O. Box Number is Not Acceptable)	20951-2 Via Alamanca
				83	
				84 City	Boca Raton, Fl.
				FL	85 Zip Code
					33428

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]* (Type or printed name of registered agent and date of signature)
Date: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DV	1. TITLE	DV
NAME	SABATINO, MICHAEL	12. NAME	Sabatino, Michael
STREET ADDRESS	3860 CORAL TREE CIR., STE. 307	13. STREET ADDRESS	20951-2 Via Alamanca
CITY-ST-ZIP	COCONUT CREEK FL	14. CITY-ST-ZIP	Boca Raton, Fl. 33428
TITLE	P	2. TITLE	
NAME	GELFOND, BARBARA	22. NAME	
STREET ADDRESS	6260 FALLS CIR. DR., STE. 108	23. STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL FL	24. CITY-ST-ZIP	
TITLE		3. TITLE	
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY-ST-ZIP		34. CITY-ST-ZIP	
TITLE		4. TITLE	
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY-ST-ZIP		44. CITY-ST-ZIP	
TITLE		5. TITLE	
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY-ST-ZIP		54. CITY-ST-ZIP	
TITLE		6. TITLE	
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY-ST-ZIP		64. CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(A), 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.

SIGNATURE: *[Signature]* (Vi Pres) 2/26/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)