2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State
01-30-2001 90051 028 ***158.75

DOCUMENT # 439844

1. Entity Name
TELCOM SERVICES, INC.

Principal Place of Business	Mailing Address
~~10 S.E. 1ST AVE.~~	~~10 S.E. 1ST AVE.~~
~~DELARY BEACH FL 33444-3606~~	~~DELARY BEACH FL 33444-3606~~
US	US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4733 W. ATLANTIC AVE	4733 W. ATLANTIC AVE
Suite, Apt. #, etc.: BLdg C-21	Suite, Apt. #, etc.: BLdg C-21
City & State: DELRAY BEACH, FL	City & State: DELRAY BEACH, FL.
Zip: 33445 Country: US	Zip: 33445 Country: US

4. FEI Number 59-1474270 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~GALLO (CARL R.)~~
~~10 S.E. 1ST AVENUE~~
~~2ND FLOOR~~
~~DELRAY BEACH FL 33444~~

7. Name and Address of New Registered Agent

Name: HERBERT MORICI
Street Address (P.O. Box Number is Not Acceptable): ~~4343 W. ROYAL LANE~~ 4733 W. ATLANTIC AVE
~~SUITE 120~~ Suite C-21
City: ~~IRVING~~ DELRAY BEACH FL Zip Code 33445

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: Herbert M Morici — Jan 23, 2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	C	☐ Delete	TITLE	☒ Change ☐ Addition
NAME	GALLO,CARL R		NAME	
STREET ADDRESS	~~10 S.E. 1ST AVENUE 2ND FLOOR~~		STREET ADDRESS	4733 W. ATLANTIC AVE BLdg C-21
CITY-ST-ZIP	~~DELRAY BEACH FL 33444~~		CITY-ST-ZIP	DELRAY BEACH, FL 33445
TITLE	P	☐ Delete	TITLE	☒ Change ☐ Addition
NAME	PETRULLI, DOMINICK JR		NAME	
STREET ADDRESS	~~2172 CALE DE CASTELAR~~		STREET ADDRESS	7259 FRANKFORT STREET
CITY-ST-ZIP	~~NAVARRE FL 32566~~		CITY-ST-ZIP	NAVARRE, FL 32566
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

CR2E034 (10/00)

13. 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 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, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carl R Gallo Chairman CARL R GALLO 1.23.01 561.496.7770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #