

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90971 007 ***150.00

DOCUMENT # L55841

1. Entity Name
CIRCA TELECOM U.S.A., INC.



Principal Place of Business
**9835 DENTON AVENUE
HUDSON FL 34667**

Mailing Address
**9835 DENTON AVENUE
HUDSON FL 34667**

2. Principal Place of Business

6293 W. Linebaugh Ave
Suite, Apt. #, etc.

3. Mailing Address

6293 W. Linebaugh Ave
Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

Country

33625 USA

Zip

Country

33625 USA

4. FEI Number **59-3004578**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MILLER, STANLEY M
748 BROADWAY
SUITE 201
DUNEDIN FL 34698**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **SMITH, IVAN W.**
STREET ADDRESS **#14 700-58 AVENUE S.E.**
CITY-ST-ZIP **CALGARY, AB, CANADA T2H2E2**

TITLE **O** ☐ Delete
NAME **PAGNOZZI, ERNEST A**
STREET ADDRESS **12806 IRONWOOD CIR**
CITY-ST-ZIP **BAYONET POINT FL 34667**

TITLE **O** ☐ Delete
NAME **DERASMO, DAN**
STREET ADDRESS **2068 GROVELAND RD**
CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DAN DERASMO
OFFICER OR DIRECTOR

2-17-03

727 868 1200

Date

Daytime Phone #

CR2E034 (10/02)