

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 # 574316

1. Corporation Name

D&L TELECOMMUNICATIONS, INC.

Principal Place of Business

3430 NE 6TH TERRACE
POMPANO BEACH, FL. 33064

Mailing Address

P.O. BOX 50171
LIGHTHOUSE POINT, FL 33074

2. Principal Place of Business

21 3430 NE 6TH TERRACE

Suite, Apt. #, etc.

22

City & State
23 POMPANO BEACH, FL.

24 Zip
33064

25 Country
USA

2a. Mailing Address

26 P.O. BOX 50171

Suite, Apt. #, etc.

27

City & State
28 LIGHTHOUSE POINT, FL.

29 Zip
33074

30 Country
USA

3. Date Incorporated or Qualified

06/01/78

3a. Date of Last Report

4. FEI Number

59-1821265

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SCHORR, STEPHEN A. ESQ.
2101 N. ANDREWS AVENUE
SUITE 400
FT. LAUDERDALE, FL. 33311

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 officer or director of the corporation

DATE: Register Agent Signature (typed or printed name)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/D ☐ DELETE
NAME SMITH, DONALD R.
STREET ADDRESS 3430 NE 6TH TERRACE
CITY-STATE-ZIP POMPANO BEACH, FL. 33064

TITLE VP ☐ DELETE
NAME GAZDAYKA, WALTER
STREET ADDRESS 3430 NE 6TH TERRACE
CITY-STATE-ZIP POMPANO BEACH, FL. 33064

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

200001910272

-08/01/96--01015--031

***225.00

14. I do hereby certify that the information supplied with this form voluntarily furnishes I and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/96

954-941-7288

Daytime Phone #

CR2E034 (12/95)