## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_

SIGNATURE AND TYPE OF PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Feb 16, 2004 08:00 AM Secretary of State

866-278-7497

Daylime Phone #

	7 7 20010 0 312 12			-:			
DOCUMENT # F0100003451  1. Entity Name MIKO TELEPHONE COMMUNICATIONS, INC.					Secr	etary of State	
Principal Place of Business  2100 S. BRIDGE PARKWAY, SUITE 650  BIRMINGHAM, AL 35209  Mailing Address  2100 S. BRIDGE PARKWAY, SUITE 650  BIRMINGHAM, AL 35209							
		,					
				02112004 No Chg-P CR2E034 (10/03)			
DO NOT WRITE IN THIS SPAC			CF				
			<del></del>	4. FEI Numb 63-127		Applied For Not Applicable	
					of Status Desired	\$8.75 Additional	
·				J. Continuate	O Glada Desired	Fee Required	
	6. Name and Address of Current Regis	tered Agent		. '	• • • • • • • • • • • • • • • • • • • •	•	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			DO NOT WRITE IN THIS SPACE				
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							
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	<ol><li>Election Campaign Final Trust Fund Contribution.</li></ol>		.00 May Be led to Fees			
10.	OFFICERS AND DIREC	TORS	-1				
TITLE NAME	P CURRIE, MARGARET						
STREET ADDRESS	2100 S. BRIDGE PARKWAY, SUITE 6	U00000052908 02/16/04-80110-020 150.00					
CITY-ST-ZIP	BIRMINGHAM, AL 35204		.]		02/16/04-6	00110-020 150.00	
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	carifu that the information cumuland with this si	ling does not qualify for the over	emotion stated in Se	action 110 07(2)	(ii) Florida Statutor I	further cortifu that the information	
indicated of the cor changed	certify that the information supplied with this fi d on this report or supplemental eport is true a reporation or the receiver or trustee empoyered , or on an attachment with an address, with al	and accurate and that my signs if to execute this report as requ to other like empowered.	ture shall have the ired by Chapter 60	same legal effe 7, Florida Statut	ct as if made under o es; and that my name	ath; that I am an officer or director appears in Block 10 or Block 11 if	