

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F02000000326

1. Entity Name
DIRECT TELEPHONE COMPANY, INC.



Principal Place of Business
6300 RICHMOND, STE 301
HOUSTON TX 77057

Mailing Address
6300 RICHMOND, STE 301
HOUSTON TX 77057

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

Name

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

800023364878

09/26/03-01050-021 **250.00

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.

NRAI Services, Inc.

SIGNATURE

Juanita Mahoney

Juanita Mahoney, Ass't Secretary

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
BLOCK, SETH
6300 RICHMOND STE 301
HOUSTON TX

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Additor

TITLE
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STREET ADDRESS
CITY-ST-ZIP
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CITY-ST-ZIP
Change Additor

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven N. Thomas
President

9-9-03

7136279241

Date

Daytime Phone #

FILED

03 OCT 21 AM 11:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

CHECK HERE IF MAKING CHANGES

03

4. FEI Number

76-0688993

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CR-0314/03