FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F78308

(6)

TELAIR NETWORK, INC.

FILED May 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					C ONDIGHO ASIS CORDI SOCRE ITTEL ANGRE INTO DIGIT D	INII AIDII ALAH BINIL AINII 1001
ONE HERALD PLAZA MIAMI FL 33132		ONE HERALD PLAZA MIAMI FL 33132		DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualified	
					04/28/1982	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-2260053	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Count	try	8. This corporation owes or has paid the	
24	25 Name and Address of Cur	rent Pagistered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New Negisters	ou Agent
	RRIS, DOUGLAS C					
ONE HERALD PLAZA MIAMI FL 33132					dress (P.O. Box Number is Not Acceptable)	
				3		
	·			City	<u> </u>	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Statules.						
SIGNATURE						
	Signature, typed or printed name of registered	agest and title if applicable (NOT AND DIRECTORS		lgent signature requ	ured when reinstaling) DATI ADDITIONS/CHANGES TO OFFICERS A	
12. TITLE	VT	DELETE	13.	:	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	JONES, ROSS		1.2 NAM			C outrigo C resource.
STREET ADDRESS	ONE HERALD PLAZA			£1 ADDRESS		
	MIAMI FL 33132		1	ì		
CITY-ST-ZIP TITLE	AT	DELETE	2.1 TITLE	- ST- ZIP		☐ Change ☐ Addition
NAME	SILVERGLAT, ALAN		2.2 NAM			
STREET ADDRESS	ONE HERALD PLAZA			ET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33132			7-SI-ZIP		
TITLE	AT	DELETE	3.1 TITLE			Change Addition
NAME	EFFREN, GARY	-	3.2 NAM	i		
STREET ADDRESS	ONE HERALD PLAZA			ET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33132			r-ST-ZIP		
TITLE	S	DELETE	4.1 TITLE			Change Addition
NAME	HARRIS, DOUGLASS C		4. 2 NAM			
STREET ADDRESS	ONE HERALD PLAZA			ET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33132			-ST-ZIP		
TITLE	AVP	DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME	PRYOR, BRENDA R	• •	5.2 NAM	ĺ		•
STREET ADDRESS	ONE HERALD PLAZA			ET ADDRESS		-
CITY-ST-ZIP	MIAMI FL 33132		5.4 CITY	1		
TITLE	A\$	DELETE	61 THILE			Change Addition
NAME	RODRIGUEZ, AIDA		6.2 NAM	ſ		_ • •
STREET ADDRESS	ONE HERALD PLAZA			ET ADDRESS		
CITY-ST-ZIP	MIAMI FL		6.4 CfTY	I		
VIII - OI - ZIF	TYTE WYN 1 %		■ 0.4 UII	01.51		

14. 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 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.

Brenda Rogers Pryor

2/4/98

305-376 2050