FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -8 AM 9:23

DOCUMENT # F93000005194 (6)

1. Corporation Name
INTERNATIONAL GATEWAY COMMUNICATIONS, INC.

Principal Place of Business	Mailing Address
5601 WEST 120TH STREET ALSIP IL 60658	C/O SPINA, MCGUIRE & OKAL, P.C. 7610 WEST NORTH AVENUE ELMWOOD PARK IL 60635

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/16/1993	3a. Date of Last Report: 09/20/1994
4. FEI Number: 36-3825351	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City FL 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	C ☐ Change ☒ Addition
NAME	HAHN, GEORGETTE J	1.2 NAME	AMENDALA, JOSEPH
STREET ADDRESS	5601 WEST 120TH STREET	1.3 STREET ADDRESS	5601 WEST 120TH STREET
CITY-ST-ZIP	ALSIP IL 60658	1.4 CITY-ST-ZIP	ALSIP, IL 60658
TITLE	STD	2.1 TITLE	☐ Change ☐ Addition
NAME	AMENDALA, BRIAN	2.2 NAME	
STREET ADDRESS	5601 WEST 120TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	ALSIP IL 60658	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	AMENDALA, JOSEPH	3.2 NAME	
STREET ADDRESS	5601 WEST 120TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	ALSIP IL 60658	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	CARINGELLA, MICHAEL	4.2 NAME	
STREET ADDRESS	7402 WEST GRAND AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	ELMWOOD PARK IL 60635	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 addition.

SIGNATURE: Joseph J. Amendala Director 708-489-9400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone number

0480480 FP