

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 25, 1999 8:00 am**  
**Secretary of State**

03-25-1999 90062 039 \*\*\*508.75

DOCUMENT # **F94000000910**

1. Corporation Name  
**RAPID LINK U.S.A., INC.**



Principal Place of Business  
1000 CIRCLE 75 PARKWAY  
SUITE 700  
ATLANTA GA 30339

Mailing Address  
1000 CIRCLE 75 PARKWAY  
SUITE 700  
ATLANTA GA 30339

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**02/23/1994**

4. FEI Number

**57-0986779**

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NRAI SERVICES, INC.**  
**526 E PARK AVE.**  
**TALLAHASSEE FL 32301**

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 607.1508, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ASD ☐ DELETE  
NAME HILLS JR, JAMES M  
STREET ADDRESS 107 CANNON ST.  
CITY-ST-ZIP GEORGETOWN SC

1.1 TITLE D ☐ Change ☐ Addition  
1.2 NAME Wong David D  
1.3 STREET ADDRESS 2611 Gladstone Terrace  
1.4 CITY-ST-ZIP Woodstock, GA 30189

TITLE TD ☐ DELETE  
NAME MOORE IV, HENRY S  
STREET ADDRESS 503 EGRET CIRCLE  
CITY-ST-ZIP GEORGETOWN SC 29442

2.1 TITLE D ☐ Change ☐ Addition  
2.2 NAME Theimer Jack  
2.3 STREET ADDRESS 601 California St. #1108  
2.4 CITY-ST-ZIP San Francisco, CA 94108

TITLE ATD ☐ DELETE  
NAME WISE, PATRICIA L  
STREET ADDRESS 82 RUTLEDGE AVE.  
CITY-ST-ZIP CHARLESTON SC

3.1 TITLE TD ☐ Change ☐ Addition  
3.2 NAME Wise Patricia  
3.3 STREET ADDRESS 3623 Sope Creek Farm  
3.4 CITY-ST-ZIP Marietta, GA 30067

TITLE VSD ☐ DELETE  
NAME WISE, TIMOTHY D  
STREET ADDRESS 2008 CHELTON WAY  
CITY-ST-ZIP SMYRNA GA

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE PCD ☐ DELETE  
NAME WISE, THOMAS D  
STREET ADDRESS 1000 CIRCLE 75 PARKWAY STE 700  
CITY-ST-ZIP ATLANTA GA

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE AS ☐ DELETE  
NAME WISE, DAVID O.  
STREET ADDRESS 745 HUNTINGTON PL  
CITY-ST-ZIP MARIETTA GA 30067

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/99 678.385.5445  
Date Daytime Phone #

CR2E034 (11/98)