## 2002 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 20, 2002 8:00 am Secretary of State DOCUMENT # F95000004991 1. Entity Name ISR GLOBAL TELECOM, INC. 05-20-2002 90065 012 \*\*\*150 00 Principal Place of Business Mailing Address 2600 LAKE LUCIER DR. 2600 LAKE LUCIER DR. 350 MAITLAND FL 32751 MAITLAND FL 32751 US HS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0264921 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SCHMALTZ, DONALD R Street Address (P.O. Box Number is Not Acceptable) 618 BUTLER STREET WINDERMERE FL 34786 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition NAME SCHMALTZ, DONALD R NAME STREET ADDRESS 618 BUTLER STREET STREET ADDRESS CITY-ST-ZIP WINDERMERE FL 34786 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME ATWAL, PETER B NAME STREET ADDRESS 2417 ALAQUA DR STREET ADDRESS CITY-ST-7IP LONGWOOD FL 32779 CITY-ST-ZIP -TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME ROSENFELD, DAVID A NAME STREET ADDRESS 600 E GORE ST STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32806 CITY-ST-ZIP ☐ Delete TITLE" ☐ Change Addition MAYER, THOMAS NAME STREET ADDRESS 24350 N. WHISPERING RIDGE WAY, #48 STREET ADDRESS CITY-ST-ZIP SCOTTSDALE AZ 85255 CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE

13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rosenfeld Vlothnance 4/35

☐ Change

Addition