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

FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # F96000003188 (7)

1. Corporation Name
INTECOM INC.

Principal Place of Business	Mailing Address
5057 KELLER SPRINGS ROAD DALLAS TX 75248	5057 KELLER SPRINGS ROAD DALLAS TX 75248

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/24/1996**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 Tax Dept
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: **04-2892472** ☐ 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 or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No

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

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 _____ 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	COBD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PAYER, JACQUES		1.2 NAME		
STREET ADDRESS	19 AVENUE CARNOT, 91348 MASSY CEDEX		1.3 STREET ADDRESS		
CITY-ST-ZIP	FRANCE		1.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DUMOLARD, JEAN-PIERRE		2.2 NAME		
STREET ADDRESS	RUE J.P. TIMBAUD - B.P. 28, BOIS-D'ARCY		2.3 STREET ADDRESS		
CITY-ST-ZIP	CEDEX 78392 FRANCE		2.4 CITY-ST-ZIP		
TITLE	CEOP	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	PLATT, GEORGE		3.2 NAME		
STREET ADDRESS	7305 MCKAMY BOULEVARD		3.3 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX 75248		3.4 CITY-ST-ZIP		
TITLE	V	☒ DELETE	4.1 TITLE	Assistant Secretary	☐ Change ☒ Addition
NAME	MCDONALD, JOHN		4.2 NAME	Jean-Francois Boulin	
STREET ADDRESS	6423 WICKERWOOD DRIVE		4.3 STREET ADDRESS	Rue JP Timbaud - B.P.26, Bois-D'Arcy	
CITY-ST-ZIP	DALLAS TX 75248		4.4 CITY-ST-ZIP	Cedex 78392 France	
TITLE	D	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	SORBA, OLIVER		5.2 NAME		
STREET ADDRESS	1633 BROADWAY 45TH FLOOR		5.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10019		5.4 CITY-ST-ZIP		
TITLE	VPCS	☐ DELETE	6.1 TITLE		☑ Change ☐ Addition
NAME	O'BRIEN, GEORGE A		6.2 NAME		
STREET ADDRESS	~~8804 WINDING RIDGE DR.~~		6.3 STREET ADDRESS	5353 KELLER SPRINGS RD. #2214	
CITY-ST-ZIP	~~DALLAS TX~~		6.4 CITY-ST-ZIP	DALLAS, TX 75248	

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.

SIGNATURE: [illegible]

CR2E034 (10/97)