

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

FILED  
Jan 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000003239 (8)

1. Corporation Name  
PICK COMMUNICATIONS CORP.

Principal Place of Business  
155 ROUTE 46 WEST, 3RD FLOOR  
WAYNE NJ 07470

Mailing Address  
155 ROUTE 46 WEST, 3RD FLOOR  
WAYNE NJ 07470

DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified 06/26/1996	4. FEI Number 75-2107261	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	PCD <input type="checkbox"/> DELETE
NAME	LEIVA, DIEGO
STREET ADDRESS	99 CHEYENNE WAY
CITY-ST-ZIP	WAYNE NJ
TITLE	V <input type="checkbox"/> DELETE
NAME	QUINN, KAREN M
STREET ADDRESS	5535 NETHERLAND AVENUE
CITY-ST-ZIP	BRONX NY
TITLE	VSD <input type="checkbox"/> DELETE
NAME	BRENNAN, RAYMOND M
STREET ADDRESS	139 W LAKE SHORE DR
CITY-ST-ZIP	ROCKAWAY NJ
TITLE	VT <input checked="" type="checkbox"/> DELETE
NAME	PETERSSEN, KARL R
STREET ADDRESS	16 FRANKLIN PLACE
CITY-ST-ZIP	GLEN ROCK NJ
TITLE	D <input type="checkbox"/> DELETE
NAME	SAMS, ROBERT R
STREET ADDRESS	WOODHAMS FARM, OERRYMANS LA
CITY-ST-ZIP	ENGLAND
TITLE	D <input type="checkbox"/> DELETE
NAME	MARANON, RICARDO
STREET ADDRESS	1400 STILLWATER DR
CITY-ST-ZIP	MIAMI BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	VT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	ROBERT S. BINGHAM
1.3 STREET ADDRESS	118 MIDVALE RD.
1.4 CITY-ST-ZIP	MOUNTAIN LAKES, NJ 07046
2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	MARILOU C. HALVORSEN
2.3 STREET ADDRESS	145 MARILYN DR.
2.4 CITY-ST-ZIP	BRICK, NJ 08723
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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)(f), 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: *Sandra B. Mortham* 1/15/98 (973) 812-7425

CR2E034 (10/97)