

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2002 8:00 am**  
**Secretary of State**

04-30-2002 90020 016 \*\*\*150.00

**DOCUMENT # F96000003287**

1. Entity Name

**COMM SOUTH COMPANIES, INC.**

Principal Place of Business

**2909 N. BUCKNER BLVD  
SUITE 800  
DALLAS TX 75228**

Mailing Address

**2909 N. BUCKNER BLVD  
SUITE 800  
DALLAS TX 75228**

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**75-2587984**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5:00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete  
NAME **FLICKER, JONATHAN**  
STREET ADDRESS **1100 WAYNE AVE., 8TH FLOOR**  
CITY-ST-ZIP **SILVER SPRING MD 20910**

TITLE **P** ☒ Delete  
NAME **CAFFEY, CHRIS**  
STREET ADDRESS **2909 N. BUCKNER BLVD., STE. 800**  
CITY-ST-ZIP **DALLAS TX 75228**

TITLE **D** ☒ Delete  
NAME **BLANCO, GUSTAVO**  
STREET ADDRESS **8390 NW 25TH STREET**  
CITY-ST-ZIP **MIAMI FL 33122**

TITLE **T** ☒ Delete  
NAME **WRIGHT, CAND E**  
STREET ADDRESS **2909 N. BUCKNER BLVD., STE. 800**  
CITY-ST-ZIP **DALLAS TX 75228**

TITLE **S** ☒ Delete  
NAME **BROWN, RICK**  
STREET ADDRESS **2909 N. BUCKNER BLVD., STE. 800**  
CITY-ST-ZIP **DALLAS TX 75228**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Director** ☒ Change ☐ Addition  
NAME **Kwok Li**  
STREET ADDRESS **8401 Colesville Rd., Suite 750**  
CITY-ST-ZIP **Silver Spring, MD 20910**

TITLE **Director** ☒ Change ☐ Addition  
NAME **Carlos Manuel Moreno**  
STREET ADDRESS **8401 Colesville Rd., Suite 750**  
CITY-ST-ZIP **Silver Spring, MD 20910**

TITLE **President** ☒ Change ☐ Addition  
NAME **John McClure**  
STREET ADDRESS **2909 N. Buckner Blvd., Suite 800**  
CITY-ST-ZIP **Dallas, Texas 75228**

TITLE **Secretary** ☒ Change ☐ Addition  
NAME **David Katz**  
STREET ADDRESS **8401 Colesville Rd., Suite 750**  
CITY-ST-ZIP **Silver Spring, MD 20910**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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 changed, or on an attachment with an addressee with all other like empowered.

SIGNATURE:

*John McClure*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-APR-2002

Date

972.643.8632

Daytime Phone #

CR2E034 (9/01)