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... Mailing Address

UNIONDALE NY 11556

EAB WEST TOWER, 8TH FLOOR

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

EAB WEST TOWER, 8TH FLOOR

appears in Block 12 or Block 18 if c



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 03 1997 8:00am

Secretary of State

Daytime Phone #

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F96000005331**

INTELCO, GLOBAL INFORMATION SERVICES LTD., INC.

UNIONDALE NY 11556 3. Date Incorporated or Qualified 3a. Date of Last Report 10/14/1996 Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζıp Country 8. This corporation has liability for intangible tax under s. 199.032, Country 2mYes No 30 Florida Statutes 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 **PLANTATION FL 33324** 83 Zip Code 84 City 85 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 \$ glacovillyprocox propertions, of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 ☐ Addition Change DELETE 1.1 TITLE 711118 12 NAME PILUSO, CHARLES NAME 1.3 STREET ADDRESS EAB WEST TOWER, 8TH FLOOR STREET ADDRESS 1.4 CITY-ST-ZIP UNIONDALE NY 11556 CHY-ST-ZiP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME REBETTI, RICHARD 2.3 STREET ADDRESS EAB WEST TOWER, 8TH FLOOR STREET ADORESS **UNIONDALE NY 11556** 2. 4 CITY - ST - ZIP CITY- \$1-7/P Addition DELETE Change 3.1 TITLE TITLE NAME 3.2 NAME FISHER, RUTH 3 3 STREET ADDRESS EAB WEST TOWER, 8TH FLOOR STREET ADDRESS 3 4. CITY-ST-ZIP **UNIONDALE NY 11556** 011 Y - ST - 71P DELETE Change Addition 4 1 TITLE TIRLE 4 2 NAME FISHMAN, ERIC NAME 4.3 STREET ADDRESS 1300 N. 17TH ST., 11TH FLOOR STREET ADDRESS **ROSSLYN VA 22209** 4.4 CITY-ST-ZIP CITY-\$1-712 Change Addition DELETE 5.1 TITLE TillE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 6.1 TITLE THLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP City St. ZP 14. I do 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