

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

FILED
Feb 02 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 # F97000001483 (3)
 1. Corporation Name
TELESTRUCTURES, INC.

Principal Place of Business: **1040 CROWN POINTE PKWY., #800 ATLANTA GA 30338**
 Mailing Address: **1040 CROWN POINTE PKWY., #800 ATLANTA GA 30338**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21. Suite, Apt. #, etc.	25. Suite, Apt. #, etc.	03/24/1997	58-2074788	<input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Country	29. Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

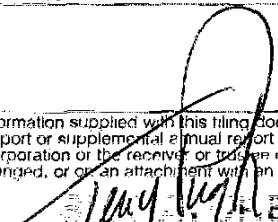
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	81. Name
	82. Street Address (P.O. Box Number is Not Acceptable)
	83.
	84. City
	85. Zip Code

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 _____ (NAME) _____
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	PDC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, CHUCK	1.2 NAME	
STREET ADDRESS	1040 CROWN POINTE PKWY., #800	1.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30338	1.4 CITY-ST-ZIP	
TITLE	VDC	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NEUROHR, BRUCE W	2.2 NAME	
STREET ADDRESS	1040 CROWN POINTE PKWY., #800	2.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30338	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUGH, TERREL	3.2 NAME	
STREET ADDRESS	1040 CROWN POINTE PKWY., #800	3.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA 30338	3.4 CITY-ST-ZIP	
TITLE	ST	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JACOBS, MICHAEL E	4.2 NAME	
STREET ADDRESS	1040 CROWN POINTE PKWY., #800	4.3 STREET ADDRESS	Kathy Glass-Broussard
CITY-ST-ZIP	ATLANTA GA 30338	4.4 CITY-ST-ZIP	510 Bering Drive Suite 500
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PUGH, TERRY	5.2 NAME	
STREET ADDRESS	1040 CROWN POINTE PKWY., #800	5.3 STREET ADDRESS	Ted Miller - Director
CITY-ST-ZIP	ATLANTA GA 30338	5.4 CITY-ST-ZIP	510 Bering Drive Suite 500
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	Director
STREET ADDRESS		6.3 STREET ADDRESS	John Gwyn
CITY-ST-ZIP		6.4 CITY-ST-ZIP	510 Bering Drive Suite 500

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 197(3)(b), 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:  **Terry Pugh** 1-26-98

CR2E034 (10/97)