"AMENDED"

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000002158

1. Entity Name

STORMTEL, INC.

FILED
00 JUN 29 AM 11: 42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business

[illegible] SE 16TH PL
CAPE CORAL FL 33904

Mailing Address

4417 SE 16TH PL
11
CAPE CORAL FL 33904-7471
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip | Country

3. Mailing Address

Suite, Apt. #, etc

City & State

Zip | Country

4. FEI Number 65-0759103 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHUBOKAS, TOM C
4417 SE 16TH PL #11
CAPE CORAL FL 33904

7. Name and Address of New Registered Agent

Name JAMES R BECKER

Street Address (P.O. Box Number is Not Acceptable)
2 N. FERNWOOD UNIT 19

City CLEARWATER FL FL Zip Code 33765

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 James R Becker TREAS. JAMES R BECKER 6/22/00

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, 2000 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PDC CHUBOKAS, TOM C 4417 SE 16TH PL #11 CAPE CORAL FL 33904	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DAMIAN FREEMAN PD 2624 W. GRAND RESERVE #727 CLEARWATER FL 33759	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SDT WASTON, JAMES C 4417 SE 16TH PL #11 CAPE CORAL FL 33904	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JAMES R. BECKER T 2 N. FERNWOOD UNIT 19 CLEARWATER, FL 33765	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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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 address, with all other like empowered.

SIGNATURE James R Becker TREAS JAMES R BECKER 6/22/00 941-945-2335

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #