


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

FILED
Mar 05 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 # **F97000003481 (5)**

1. Corporation Name
TELECAPITAL CORP.



Principal Place of Business 2530 SOUTH PARKER ROAD, STE 600 AURORA CO 80014	Mailing Address 2530 SOUTH PARKER ROAD, STE 600 AURORA CO 80014
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3010 LBS Freeway Suite, Apt. #, etc. Suite 930 City & State Dallas, Tx Zip 75234 Country USA		2a. Mailing Address 26 3010 LBS Freeway Suite, Apt. #, etc. Suite 930 City & State Dallas Tx Zip 75234 Country		3. Date Incorporated or Qualified 05/09/1997	4. FEI Number 84-1327023 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 type="checkbox"/> No	

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 MAYS 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 FL 85 Zip Code	
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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

Signature, typed or printed name of registered agent and title if applicable.

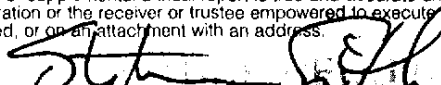
(NOTE: Registered Agent signature required when rehashing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARVEY, DAVE	1.2 NAME	
STREET ADDRESS	2530 S. PARKER RD., STE 600	1.3 STREET ADDRESS	
CITY-ST-ZIP	AURORA CO	1.4 CITY-ST-ZIP	
TITLE	VST	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, STEPHEN	2.2 NAME	
STREET ADDRESS	2530 S. PARKER RD., STE 600	2.3 STREET ADDRESS	
CITY-ST-ZIP	AURORA CO	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLS, DAVID W	3.2 NAME	
STREET ADDRESS	1205 PACIFIC AVE., STE 203	3.3 STREET ADDRESS	
CITY-ST-ZIP	SANTA CRUZ CA	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REGAN, JAMES S	4.2 NAME	
STREET ADDRESS	33 WITHERSPOON STREE, 3RD FL	4.3 STREET ADDRESS	
CITY-ST-ZIP	PRINCETON NJ	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



2/26/98

972 247-7139

CR2E034 (10/97)