

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

FILED
May 21 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 # F97000004097 (8)
 1. Corporation Name:
NETWORKS TELEPHONY CORPORATION



Principal Place of Business 2100 E. GRAND AVE. EL SEGUNDO CA 90245	Mailing Address 2100 E. GRAND AVE. EL SEGUNDO CA 90245
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DO NOT WRITE IN THIS SPACE

21 Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

3. Date Incorporated or Qualified 08/04/1997	
4. FEI Number 95-4605406	Applied For 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 HAYS 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

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 _____ DATE _____
Signature type for public (mark if registered by agent) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	PERREN, WILLIAM	
STREET ADDRESS	121 7TH ST.	
CITY-ST-ZIP	MANHATTAN BEACH CA 90266	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COLLAZO, JOSE	
STREET ADDRESS	2829 VIA LA SELVA	
CITY-ST-ZIP	PALOS VERDES ESTATES CA 90274	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SHUM, MARTIN	
STREET ADDRESS	1502 AVENIDA DE APRISA	
CITY-ST-ZIP	CAMARILLO CA 93010	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LANDMAN, MARTIN	
STREET ADDRESS	66 WIGMORE ST.	
CITY-ST-ZIP	LONDON W1H 0HQ	
TITLE	D	<input type="checkbox"/> DELETE
NAME	NAHON, LEON R	
STREET ADDRESS	66 WIGMORE ST.	
CITY-ST-ZIP	LONDON W1H 0HQ	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	GAMBARO, ERNEST U	
STREET ADDRESS	66 WIGMORE ST.	
CITY-ST-ZIP	LONDON W1H 0HQ	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

<input type="checkbox"/> Change <input type="checkbox"/> Addition
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<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 _____

CR2E034 (10/97)