## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## F98000003798 **DOCUMENT #**



**FILED** Feb 17, 2003 8:00 am Secretary of State

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	GOO WE THE

1. Entity Name COMSCAPE TELECOMMUNICATIONS, INC.							02-17-2003 90	9172010	150.	<i>5</i> 0	
Principal Place ( 1926 10TH AVE. WEST PALM BEA	of Business N STE. 305 ACH FL 33461-3310	1926 10TH	Mailing Address 1926 10TH AVE. N., STE, 305 WEST PALM BEACH FL 33461-3310			- <del>1</del>					
2. Principal Pla	ce of Business	3. Mailing	3. Mailing Address				<b>                                  </b>	60 <u>   </u> 08141	15616 1611		
Suite, Apt. #	, etc.	Suite, A	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State		City & S	City & State			4. F	31-1470037		Not	lied For Applicable	
Zip	Country	Zip	Zip Country					Fe Fe	<b>3.75</b> Addit e Required	ional	
	6. Name and Address of Cur	rent Registered	Agent	~		7. N	ame and Address of New Reg	stered Age	ent _		
	· · · · · · · · · · · · · · · · · · ·			ļ	Name						
	ANSHYAM C				Street Address	s (P.O. Bo	ox Number is Not Acceptable)				
	AVE. N., STE. 305				<del> </del>			-	<u>-</u>		
WEST PALI	M BEACH FL 33461-3310				City	<del></del>		FL	Zip Code		
	named entity submits this statem	_			'		0.45		niliar with a	nd accept	
the obligation	ons of registered agent.  Signature, typed or printed name of registered	agent and title if applica			d Agent signature requ			DATE		May Be	
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$55 Payable to Florida Departme	0.00					Trust Fund Contribution.		Added	to Fèes	
10.		AND DIRECTORS	S	11.		AD	DITIONS/CHANGES TO OFFIC				
TITLE NAME STREET ADDRESS	PC PATEL, GHANSHYAM C 1926 10TH AVE. N., STE. 30 WEST PALM BEACH FL 334	)5	☐ Delete						Change	Addition	
TITLE NAME STREET ADDRESS	DS BYRNE, JEREMIAH P 1926 10TH AVE. N., STE. 3 WEST PALM BEACH FL 334	05	☐ Delete						☐ Change	☐ Addition	
TITLE	TD JAYANTHAN, JAY K 1926 10TH AVE. N., STE. 3 WEST PALM BEACH FL 334	05	Deleté -	NA!	E	. <u> </u>	The second secon		☐ Change	☐ Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	WEST PALM BEACHTE SO	HO 1 00 10	☐ Delete			<i></i>		<del></del>	☐ Change	Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS			☐ Delete	TIT NA ST	LE			-	☐ Change	☐ Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	certify that the information suppl		☐ Delete	TIT NA ST CI	ILE ME REET ADDRESS IY-ST-ZIP	n Section	a 119 07(3)(i). Florida Statutes. I	further cert	Change	☐ Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I during 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 eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SAE REALIBERYANTHAN

1/10/03