## =98000005040

## FILING TRANSMITTAL FORM

TO:

FLORIDA SEC OF STATE

FR:

SYLVIA CAREY

CONTINENTAL CORPORATE SERVICES, INC.

189 FRANKLIN AVENUE, SUITE 1

NUTLEY, NJ 07110

PHONE: 973-542-0300 FAX: 973-542-0313

DATE: January 3, 2002

200004830402---01/28/02--01004--006

\*\*\*\*\*35.00 \*\*\*\*\*35.00

RE:

USTR FIBER DEVELOPMENT INC.

REFERENCE: 0188SC

Confirmation Service: YES

TYPE OF SERVICE:

EXPEDITE

PLEASE FILE: CHANGE OF AGENT

PLEASE OBTAIN THE FOLLOWING EVIDENCE:

Certified Copy

RICL

NOW 1

SPECIAL INSTRUCTIONS:

SEND VIA:

TO:

EQ Corporation jan Sullivan 1266 E. Main

Stamford, CT 06902

(203) 359-9441

1/28/02 PAL Ro Change Soo.



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 9, 2002

Continental Corporate Services, Inc. 189 Franklin Avenue, Suite 1 Nutley, NJ 07110

SUBJECT: USTR FIBER DEVELOPMENT INC.

Ref. Number: F98000005040

We have received your document for USTR FIBER DEVELOPMENT INC. and check(s) totaling \$35.00. However, your check(s) and document are being returned for the following:

The check was not signed.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne Senior Section Administrator

Letter Number: 502A00001291

O2 JAN 28 AN IO: 33
DIVISION OF CORPORATIONS

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	the provisions of sections				Florida Statut	es,	
the undersigned corporation organized under the laws of the State of Delaware submits the following statement in order to change its registered office or registered agent, or both, in							· · <del></del>
the State of F		er to cnange its	registered offic	e or registered	agent, or both,	in	
•	of the corporation : USTR	Fiber Developme	ent Inc.				
	11				<u> </u>		: : : : : : : : : : : : : : : : :
2. The mailin	ng address of the corporation	on : 8 East Loock	erman Street, D	over, DE 19901	·		
*** - <b>**</b> *		· · · · · · · · · · · · · · · · · · ·		<b>≱</b> 8			· · · · · · · · · · · · · · · · · · ·
3. Date of in	corporation/qualification:	9/8/98	Docum	nent number: F9	8000005040		
4. The name	and address of the current	registered agent	and office:		, <u></u>		
		•					
	CT Corporation System		<u></u>		<del>***</del>		· · · · · · · · · · · ·
	1200 South Pine Island R	Road	·····	. т	-		
	Plantation, FL 33324						Ling 1.
5. The name a	and address of the new reg (I	istered agent (if P. O. Box <b>Not</b> A	changed) and/occeptable)	or registered offi	ce (if changed):		
	NRAI Services, Inc.		. •		TAE AL	02	
	526 E. Park Avenue			<u> </u>	LAH	NAC	71
	Tallahassee, FL 32301				SS	28	JED TED
agent, as chai	dress of its registered offic nged, will be identical.				٠	AMII: 39	Ð
Such change authorized by	was authorized by resolut the board.	ion duly adopte	d by its board o	of directors or by	y an officer 🕰	739 1711	
Penis a	Julian			January 2,	⋚	141 —	
(Signatu	ire of an officer, chairman or vice	chairman of the board	d)	(Date)		÷	A1
anice A. Sulliv	ran - Assistant Secretary (Printed or typed name ar	nd title)		a reva	£ .	, '=	:
Having been to corporation, I further agre performance tregistered ago NRAI Services	named as registered agen I hereby accept the appoint the to comply with the proving of my duties, and I am far tent.	t and to accept ntment as regist isions of all stat niliar with and t	service of proc tered agent and tutes relative to accept the obliq	ess for the abov agree to act in the proper and gation of my pos	e stated this capacity. l complete sition as		
	1/A-1///			1/3/02			
	(Signature of Registered Agent)			(Date)	<del></del>	-	
If signing on bel	half of an entity:			, <b>a</b>			
	GARY Shenn	nay	***	ASST- SE		. 54	
	(Typed or Printed Name)			(Capacity)			

\* \* \* FILING FEE: \$35.00 \* \* \*