FILED
May 15, 1999 8:00 am
Secretary of State
05-15-1999 90008 034 ***150.00

PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F98000006326

Corporation Name
TELMATCH TELECOMMUNICATIONS, INC.

Principal Place of Business
11205 NEW ORLEANS DR.
FRISCO TX 75035

Mailing Address
11205 NEW ORLEANS DR.
FRISCO TX 75035

Date Incorporated or Qualified
11/17/1998

FEI Number
APPLIED FOR 75-2714728
Applied For
Not Applicable

Certificate of Status Desired ☐ $8.75 Additional Fee Required

Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

21 Principal Place of Business		26 Mailing Address	1900 Preston Rd.
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.	267-198
23 City & State		28 City & State	Plano, TX
24 Zip	25 Country	29 Zip	75093
		30 Country	USA

Name and Address of Current Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

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

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 resigning) DATE

OFFICERS AND DIRECTORS

TITLE	PCD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MILLER, EDWARD	1.2 NAME	
STREET ADDRESS	11205 NEW ORLEANS DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	FRISCO TX	1.4 CITY-ST-ZIP	
TITLE	VSD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MILLER, SUE E	2.2 NAME	
STREET ADDRESS	11205 NEW ORLEANS DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FRISCO TX	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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, with all other like empowered.

Edward Miller Edward H. Miller 4/29/99 800-262-6497
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL

CR2E034 (11/98)