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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9800007001

BASIS COMMUNICATIONS CORPORATION

I would brough which is by assume in	
Principal Place of Business	Mailing Address
00 WEST WARREN AVENUE, SUITE A	3100 WEST WARREN AVENUE, SUITE A

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90066 036 ***150.00



1	Company of the particle of									
Principal Place of Business Mailing Address								0111 06 111 1 90 11 0 0		
B100 WEST WARREN AVENUE. SUITE A 3100 WEST WARREN AVENUE. FREMONT CA 94538 FREMONT CA 94538			je. Suiti	E A		DO NOT WRITE IN THIS SPACE				
							3, Date Incorporated or Qualifed			Ì
							12/23/1998			_
	Place of Business		ling Address				4. FEI Number	\Box	Applied For	_
21 26 Suite, Apt. #, etc. Sui			Cuite Ant H ate				94-3315610	\$9.7	Not Applicabl	"
22		27	<u> </u>				5. Certificate of Status Desired			
City & Sta	te	City	City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
Zip	Country	Zip		Cou	Country		8. This corporation owes the current year	ar Intangible		
24	25	29	29 30				Personal Property Tax. ☐ Yes ☐ No			
<u>- : L</u>	9. Name and Address of Cur	rent Registered	i Agent				10. Name and Address of New Registe	red Agent		
					81	Name				
	PORATE ACCESS INC.				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			\dashv
	EAST 6TH AVE.							·		_
TALL	AHASSEE FL 32303				83		. 15		;	-
. •		30 66			84	City		FL 85 Z	ip Code	7
11. Pursuant office or a agent, 1 a	to the provisions of Sections 607.1 registered agent, or both, in the Starm familiar with, and accept the ob-	0502 and 607.15 ate of Florida. Si igations of, Sect	i08, Florida Statute uch change was a tion 607.0505, Flo	es, the a uthorized rida State	bove- by thutes.	named corpo ne corporatio	oration submits this statement for the purpos n's board of directors. I hereby accept the a	se of changing ppointment as	its registered registered	
SIGNATURE	•									
	Signature, typed or printed name of registered			<u>-</u> -	Agent	signature required	when reinstating) DAT			<u>وَ</u>
12.		AND DIRECTO		13.			ADDITIONS/CHANGES TO OFFICER	S AND DIREC		긁
TITLE	PC		DELETE		1.1 TITLE			C. Criair	Aa □ voorm	" <u>S</u>
NAME	SHEALY, MICHAEL D				1.2 NAME					हे
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CITY+ST-ZIP	FREMONT CA 94538				TY-ST	ZIP		☐ Chan	ge Addition	, 은
TITLE	TD		☐ DELETE	2.1 TI		1		☐ Cilan	ge LI Adoliu	"
NAME	MORRIN, PATRICK J				2.2 NAME					
STREET ADDRESS	3100 WEST WARREN AVENU	E, SUILE A			2.3 STREET ADDRESS .					╽.
CITY-ST-ZIP	FREMONT CA 94538				2.4 CITY-ST-ZIP			Chan	ge 🔲 Additio	- -
TITLE	D		☐ DELETE 3.1 TO						ão □ vooin	‴
NAME	ATKINSON, LLOYD	. ALIENNE ALIEN			3.2 NAME					
		3100 WEST WARREN AVENUE, SUITE A				NDDRESS				-
CITY-ST-ZIP	FREMONT CA 94538		DELETE	3.4. C	TY-ST-	ZIP		☐ Chan	ge 🗍 Additio	<u></u>
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NAME	CHOU, KEVIN S ESQ.			4.2 N						-
	TWO PALO ALTO SQUARE					DDRESS				
	PALO ALTO CA 94306		☐ DELETE	_	TY-ST-	ZIP		☐ Chan	ge Addition	<u> </u>
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NAME				•		DORESS				1
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				6.2 NA					·	
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1 11Y-NI-7ID				- 0.7 0						

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, with all other like empowered.

SIGNATURE:

570) 624 7605