

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 05, 2000 8:00 am
Secretary of State
 04-05-2000 90096 003 ***150.00

DOCUMENT # F99000002225

1. Entity Name

GLOBAL CROSSING USA INC.

Principal Place of Business

150 EL CAMINO DR., STE 204
 BEVERLY HILLS CA

Mailing Address

150 EL CAMINO DR., STE 204
 BEVERLY HILLS CA 90212-2737

2. Principal Place of Business

3. Mailing Address

360 N. Crescent Dr.

360 N. Crescent Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Beverly Hills, CA

City & State

Beverly Hills, CA

Zip

90210

Country

USA

Zip

90210

Country

USA

4. FEI Number

52-2160333

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☒
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
 NAME PORTER, BARRY
 STREET ADDRESS 150 EL CAMINO DRIVE STE 204
 CITY-ST-ZIP BEVERLY HILLS CA

TITLE VSD ☐ Delete
 NAME COOK, SHERRI
 STREET ADDRESS 150 EL CAMINO DRIVE STE 204
 CITY-ST-ZIP BEVERLY HILLS CA

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS *360 N. Crescent Dr.*
 CITY-ST-ZIP *Beverly Hills, CA 90210*

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS *360 N. Crescent Dr.*
 CITY-ST-ZIP *Beverly Hills, CA 90210*

TITLE ☐ Change ☒ Addition
 NAME *VT Joseph Tesoriero*
 STREET ADDRESS *360 N. Crescent Dr.*
 CITY-ST-ZIP *Beverly Hills, CA 90210*

TITLE ☐ Change ☒ Addition
 NAME *Jeff Cohen*
 STREET ADDRESS *360 N. Crescent Dr.*
 CITY-ST-ZIP *Beverly Hills, CA 90210*

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph Tesoriero

Date

Daytime Phone #

(310) 385-5200

CR2E014 (9/98)