FILED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

May 05, 2003 8:00 am Secretary of State H05169 DOCUMENT # 05-05-2003 90152 036 ***150.00 1. Entity Name ADVANCED TELECOMMUNICATIONS SYSTEMS, INC. Principal Place of Business Mailing Address 1131 N.E. 214TH ST. 1131 N.E. 214TH ST. MIAMI FL 33179-1317 MIAMI FL 33179-1317 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-2413994 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent-Name HUGHES, VIRGINIA F Street Address (P.O. Box Number is Not Acceptable) 1131 N.E. 214TH STREET 🖟 NO. MIAMI BEACH FL 33179 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete TITLE ☐ Change ☐ Addition HUGHES, LEONARD G NAME NAME STREET ADDRESS 1131 N.E. 214 STREET STREET ADDRESS N. MIAMI BEACH FL 33179 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HUGHES, VIRGINIA F NAME STREET ADDRESS 1131 NE 214TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33179 CITY-ST-ZIP TITLE - 🖾 - Delete — 🖳 TITLE - Ghange --- - Addition-NAME HUGHES, REBECCA NAME STREET ADDRESS STREET ADDRESS 1131 N.E. 214 STREET CITY-ST-ZIP N. MIAMI BEACH FL 33179 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition HUGHES, DARRYL E NAME STREET ADDRESS 1131 N.E. 214 STREET STREET ADDRESS N. MIAMI BEACH FL 33179 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 10 or Block 11 if

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP