

Amended

607 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 513184
 1. Entity Name
TELEPHONE ENGINEERING AND MAINTENANCE, INC.

APPROVED
AND
FILED

00 NOV 20 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
6702 BENJAMIN RD.
#100
TAMPA FL 33634

2. Principal Place of Business 3. Mailing Address
6702 BENJAMIN RD 6702 BENJAMIN RD
 Suite, Apt. #, etc. Suite, Apt. #, etc.
#100 #100
 City & State City & State
TAMPA FL TAMPA FL
 Zip Country Zip Country
33634 USA 33634 USA

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
59-2765549 Not Applicable
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
H. RALPH COLE Name MARK D. COBB
13920 PEPPERRELL DRIVE Street Address (P.O. Box Number is Not Acceptable)
TAMPA FL 33624 302 KNIGHT'S RUN AVE.
Suite
 City State Zip Code
TAMPA FL 33602

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 Mark D. Cobb MARK D. COBB 11/17/00
 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. ☐ 10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PRESIDENT/DIRECTOR</u> <input checked="" type="checkbox"/> Delete <u>H. RALPH COLE</u> <u>13920 PEPPERRELL DRIVE</u> <u>TAMPA FL 33624</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PRESIDENT/SECRETARY/DIRECTOR</u> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <u>MARK D. COBB</u> <u>302 KNIGHT'S RUN AVE.</u> <u>TAMPA FL 33602</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>SECRETARY</u> <input checked="" type="checkbox"/> Delete <u>JUNE COLE</u> <u>13920 PEPPERRELL DRIVE</u> <u>TAMPA FL 33624</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DIRECTOR</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <u>DONALD E. DARDEN</u> <u>USA DIGITAL, INC.</u> <u>302 KNIGHTS RUN AVE TAMPA FL 33602</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>TREASURER/DIRECTOR</u> <input type="checkbox"/> Delete <u>MARK D. COBB</u> <u>302 KNIGHT'S RUN AVE.</u> <u>TAMPA FL 33602</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DIRECTOR</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <u>PETER J. LYONS</u> <u>USA DIGITAL, INC.</u> <u>302 KNIGHT'S RUN AVE, TAMPA FL 33602</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <u>000003501490--1</u> <u>-12/14/00--01023--017</u> <u>*****61.25 *****61.25</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Mark D. Cobb MARK D COBB 11/17/00 (813)221-8373
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)