

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90155 028 ***150.00

DOCUMENT # J6 0061
1. Entity Name
City Telephone Company

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1311 E. Comm Blvd
Suite, Apt. #, etc. #100

3. Mailing Address
City Telephone Co.
Suite, Apt. #, etc. P.O. Box 662045

DO NOT WRITE IN THIS SPACE

City & State
Ford Lauderdale
Zip FL 33334

City & State
Pompano Beach
Zip FL 33069

4. FEI Number
GS-0104662
Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Phil Whitaker
Street Address (P.O. Box Number is Not Acceptable)
453 W. Palm Aine Drive
City Pompano Beach FL Zip Code 33069

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 _____ (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)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Phil Whitaker</u> <u>453 W. Palm Aine, Dr.</u> <u>Pompano Beach, FL</u> <u>33069</u>
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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Phil Whitaker Date 4/26/02 Daytime Phone 954-493-9700

CR2E034B (12/01)