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

FILED May 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K15866 (2) TELECOMMUNICATION PROFESSIONALS, INC. Principal Place of Business Mailing Address 1331 GLADIOLAS DR WINTER PARK FL 32782 1331 GLADIOLAS DR WINTER PARK FL 32792 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/18/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2882138 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State Cily & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country ZiD Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SCOTT, ROGER D. 1331 GLADIOLAS DR 82 Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32792 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both agent, t are familia, with, and accept the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered the objections of, Socion 607.0505, Florida Statutes. SIGNATURE CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE ☐ Change ☐ Addition SCOTT, ROGER D. 1.2 NAME NAME 1331 GLADIOLAS DR STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE STD 2.1 TITLE SCOTT, CAROLYN I. NAME 2.2 NAME 1331 GLADIOLAS DR STREET ADDRESS 2.3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3 1 TITLE ■ Addition TIT: F NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Channe Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change Addition

SIGNATURE

TITLE NAME

STREET ADDRESS CITY-ST-ZIP

with an address

6.1 TITLE

6.2 NAME **6.3 STREET ADORESS**

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 suppliemental 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

4/20/98

407-824-2700