

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000019376

FILED  
Aug 28, 2002  
Secretary of State

**Entity Name:** ADS TELECOM SOUTH FLORIDA, LLC

**Current Principal Place of Business:**

ONE OAKWOOD BLVD.  
SUITE 150  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

ONE OAKWOOD BLVD.  
SUITE 150  
HOLLYWOOD, FL 33020

**New Mailing Address:**

59 SKYLINE DRIVE  
SUITE 1250  
LAKE MARY, FL 32746

**FEI Number:** 65-1150957

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MILAM & HOWARD, P.A.  
50 NORTH LAURA STREET  
SUITE 2900  
JACKSONVILLE, FL 32202 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: ADS TELECOM, INC.,  
Address: 59 SKYLINE DRIVE, SUITE 1250  
City-St-Zip: LAKE MARY, FL 32746

Title: MGR ( ) Change (X) Addition  
Name: ABRAM, GARY W PRES  
Address: 59 SKYLINE DRIVE, SUITE 1250  
City-St-Zip: LAKE MARY, FL 32746

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** GARY ABRAM

MGR

08/28/2002

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date