FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 90694 048 ****50.00

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000033677

1. Entity Name
VERIZON INTERNATIONAL TELECOM, LC

Principal Place of Business	Mailing Address
2040 NE 163RD STREET SUITE 303 NORTH MIAMI, FL 33162	2040 NE 163RD STREET SUITE 303 NORTH MIAMI, FL 33162

2. Principal Place of Business	3. Mailing Address
2812 N.E. 185 St.	7401 NW 16th ST
Suite, Apt. #, etc.: Suite 403	Suite, Apt. #, etc.: 108A
City & State: AVENTURA, FL	City & State: PLANTATION FL
Zip: 33180 Country:	Zip: 33313 Country:

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PINTO, BEATRICE 7401 NW 16TH STREET #108A PLANTATION, FL 33313	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing)

FILING FEE NOW: $150.00
Make Check Payable To: Florida Department of State
DUE BY: May 1, 2003

9. MANAGING MEMBERS / MANAGERS	10. ADDITIONS / CHANGES
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: PRESIDENT NORTH AMERICA CHRISTINE POTTINGER 583 N. UNIVERSITY DR. FORT LAUDERDALE Florida 33324 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: DIRECTOR OF ACCOUNTING BEATRICE PINTO 7401 NW 16 ST #108A PLANTATION, FL 33313 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: MOHAMMED F. MOUSSA PRESIDENT MIDDLE EAST & ASIA 583 N. UNIVERSITY DR. FORT LAUDERDALE, FLORIDA 33324 ☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: DIRECTOR of SWITCH ENGINEERING BARIS BALKANLI ☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: 583 N. UNIVERSITY DR. FORT LAUDERDALE, FLORIDA 33324 ☐ Delete	☐ Change ☐ Addition

CR2E083 (10/02)

11. 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 is true and accurate and that my 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 606, Florida Statutes.

SIGNATURE: _____ 04-29-2003 9546009119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE. Date Daytime Phone #

CHRISTINE POTTINGER