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

**FILED** Feb 04 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #

1. Corporation Name L26275 SECURE CALL, INC. Principal Place of Business Mailing Address 22500 SW 56TH AVE 2530 NW 112TH AVE **BOCA RATON FL 33433 CORAL SPRINGS FL 33065** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/27/1989 2. Principal Place of Business 2a. Mailing Address 4. FEt Number Applied For 21 26 59-2368150 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zìp Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes □ No 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name NEWBECK, ROBIN 22500 SW 56TH AVE 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33433** 83 84 City Zip Code 85 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, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE (10/97) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change \_\_\_ Addition TITLE 1.1 THEE VERVILLE, MARY FAY NAME CR2E034 1.2 NAME 2530 NW 112TH AVE STREET ADDRESS 1.3 STREET ADDRESS CORAL SPRINGS FL 33065 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETÉ Change Addition TITLE 2.1 TITLE **NEWBECK, ROBIN** 2.2 NAME NAME 22500 SW 56TH AVE STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33433** 2. 4 CITY-ST-ZIP Change DELETE Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 41 TITLE Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 THILE

indicated on this annual report or supplemental 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 Block 12 or Block 13 if changed, or on an attachment with an address. balac

6.3 STREET ADDRESS 6.4 CITY+ST-ZIP 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

6.2 NAME

NAME STREET ADDRESS