File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAY -6 AH 11: 36 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Malling Address of Limited Liability Company **DOCUMENT #** M9600000451 1a. Principal Place of Business Address TOUCH TONE INTERACTIVE, LLC 301 YAMATO ROAD, SUITE 3199 301 YAMATO ROAD, SUITE 3199 BOCA RATON FL 33431 BOCA RATON FL 33431 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 11/13/1996 4. FEI Number DE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable 65-0705113 5. Date of Last Report 6. Certificate of Status Desired Zip Country Zip Country \$8.75 Additional Fee Regured 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name ASARCH, STEVEN J Street Address (P.O. Box Number Is Not Acceptable) 7777 GLADES ROAD, SUITE 200 BOCA RATON FL 33434 Suite, Apt. #, etc. City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title **Business Street Address** Managing Members/Managers City, State and Zip Code SAUL, NEIL B MGR 301 YAMATO ROAD, SUITE 319 BOCA RATON FL 400002517304--4 -05/08/98--01082--010 ****188.75 *****188.75 11. I do 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 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 608, Florida Statutes; and that my name appears in Block 10, or on an

PROSIDENT CEO.

attachment with an address.

SIGNATURE: