

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90066 001 ***158.75

DOCUMENT # **P00000054995** ✓

1. Entity Name

Global Telephony Solutions, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5985 Plantation Ct.

Suite, Apt. #, etc.

3. Mailing Address

5985 Plantation Ct.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Keystone Heights, FL

Zip

Country

32656

USA

City & State

Keystone Heights, FL

Zip

Country

32656

USA

4. FEI Number

59-3654249

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name

Sean Poppell

Street Address (P.O. Box Number is Not Acceptable)

5985 Plantation Ct.

City

Keystone Heights

FL

Zip Code

32656

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and state of application

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**President
Sean Poppell
5985 Plantation Ct.
Keystone Heights, FL 32656**

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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13. 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 or supplemental 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 11 or on an attachment with an address, with all other like empowered

SIGNATURE: **Sean E. Poppell** **Sean E. Poppell** **4-26-02** **352473-5005**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)