2001 UNIFORM BUSINESS REPORT (UBR)

200	1 UNI	FORM BUSI	NESS REPO	ORT (UBR))	FIL		
DOCUMENT # P0000055550 1. Entity Name GERELCOM, INC.						Aug 01, 2001 8:00 am Secretary of State 04-23-2001 90165 038 ***150.00		
					M			
Principal Place of Business 521 N.W. ENTERPRISE DRIVE PORT ST. LUCIE FL 34986 Mailing Address 521 N.W. ENTERPRISE PORT ST. LUCIE FL 34986 PORT ST. LUCIE FL 3				***		112 00 142 01101 01101 01101	Elisi Osii)Dri	
2. Principal F	Place of Busin	ess	3. Mailing Address		_			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State			City & State		+	4. FEI Number	7 A	pplied For
Zip Country		Zip Country			65-10171 5. Certificate of Status Desired	+ (N N N N N N N N N N N N N N N N N N N	ot Applicable	
	6. Name	and Address of Current R	egistered Agent	1		7. Name and Address of New Regi	Fee Require	ed
· ALAMADO ~	_			Name	<u>-</u> -	2 Table Address of Heart legi		
NAVARETTA, STEPHEN 1100 S.W. ST. LUCIE WEST BOULEVARD				Street Addr	ress (P.C	O. Box Number is Not Acceptable)		
SUITE 203					-	<u> </u>	····	
PORT ST. LUCIE FL 34986				City			FL Zip Cod	de
8. The above	named entity	submits this statement for	the purpose of changing its	l s registered office or reg	gistered	agent, or both, in the State of Florida		
					_			
SIGNATURE .	Signature, typed o	or printed name of registered agent an	d title if applicable. (NO	E: Registered Agent signature re	equired whe	nen reinstating)	DATE	
9. This corporate filling r	requirement a	ble to satisfy its Intangible and elects to do so.	After September 1.	!!! FEE IS \$550.00 2, 2001 Fee will be \$ ble to Department of			ν _ Ψ0.0	00 May Be d to Fees
11.		OFFICERS AND D		12.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	S IN 11
TITLE NAME	D Geremia. 1	KENNETH A JR.	☐ Delete	TITLE NAME		· .	☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	521 N.W. E	NTERPRISE DRIVE LUCIE FL 34986		STREET ADDRESS CITY-ST-ZIP				
TITLE			Delete	TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME STREET ADDRESS				NAME STREET ADDRESS				
CITY-ST-ZIP				CITY-ST-ZIP	_			
TITLE		and the second s	□ Delete	NAME	• • •		_ <u>Change</u>	Addition.
STREET ADDRESS City-St-Zip				STREET ADDRESS CITY-ST-ZIP				
TITLE NAME			☐ Delete	TITLE			☐ Change	☐ Addition
STREET ADDRESS		•		NAME Street address				
CITY-ST-ZIP	_ "		-	CITY-ST-ZIP	 -			
TITLE NAME			☐ Delete	TITLE NAME			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP				
	-	-	Delete	TITLE			☐ Change	Addition
I.							-	
TITLE NAME STREET ADDRESS				NAME STREET ADDRESS				
I.				NAME STREET ADDRESS CITY-ST-ZIP				}

Attachment TD0000055550

GERELCOM 10859

VOICE / DATA-FIBER

July 27, 2001

RE: UBR

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32303-1500

Dear Sir or Madam:

SUBJECT: FEES

Please find enclosed my completed UBR. This copy indicates that the original copy I sent in April was not filed. I called your offices to confirm this. Apparently Block #4 was not filled in on the first UBR and was supposedly returned to me for completion. I did not receive this original UBR back. I did submit the appropriate fees in a timely manor along with the original UBR. I have confirmed the check was cash.

Your office has instructed to write this letter of explanation in an effort to avoid paying any further fees. I kindly request you accept this explanation, and the fees already paid, along with the enclosed completed UBR to resolve any outstanding issues.

Respectfully,

Kenneth Geremia Jr.

President

Gerelcom, Inc.