2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 14, 2001 8:00 am
Secretary of State
07-24-2001 90028 046 ***550.00

DOCUMENT # P00000099799

1. Entity Name

INTERTELE.COM, CORP.

Principal Place of Business	Mailing Address
18901 S. Dixie Highway Miami, FL 33157	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
14 NE 1st Avenue	14 NE 1st Avenue
Suite, Apt. #, etc.: 1105	Suite, Apt. #, etc.: 1105
City & State: Miami FL	City & State: Miami FL
Zip: 33132 Country: USA	Zip: 33132 Country: USA

4. FEI Number 65-1049853 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name: AKAR, ELIAS

Street Address (P.O. Box Number is Not Acceptable): 14 NE 1st Avenue, Suite 1105

City: Miami FL Zip Code: 33132

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] 7/18/01

Signature, typed or printed name of registered agent and title if applicable. (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) ☐

FLORIDA PROFIT/NON-PROFIT CORPORATION
After MAY 1, 2001 Fee will be $150.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PST KHOURY, JUAN 18901 S. Dixie Highway Miami, FL 33157	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: PST AKAR, ELIAS 14 NE 1st Avenue, Suite 1105 Miami, FL 33132 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition

CR2E034 (11/00)

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] ELIAS AKAR 7/18/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #