

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

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90888 028 ***150.00

DOCUMENT # P00000110238

1. Entity Name

AVALAY COMMUNICATIONS, INC.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1975 E. Sunrise Blvd.

3. Mailing Address

Suite, Apt. #, etc.

538 100

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

City & State

Zip

33304

Country

Zip

Country

4. FEI Number

65-1066414

Applied For

Not Applicable

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

7. Name and Address of Current Registered Agent

Name

Stephen A. Kelley Jr.

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

1975 E. Sunrise Blvd.

Suite 538 100

City

Ft. Lauderdale, FL

FL

Zip Code

33304

8. The abovenamed 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 date of signature.

NOTE: Registered Agent signature required when resigning.

4/29/02
DATE9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elect 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 \$81.25

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	D Stephen A. Kelley, Jr. 100 1975 E. Sunrise Blvd. #538 Ft. Lauderdale, FL 33304	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D James Piper 100 1975 E. Sunrise Blvd. #538 Ft. Lauderdale, FL 33304	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Marc Combs 100 1975 E. Sunrise Blvd #538 Ft. Lauderdale, FL 33304	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:


 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marc E. Combs

4/29/02

(954) 760-7010

DATE

Daytime Phone

CR2034B (12/01)