

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # P00516

1. Entity Name
INTERNATIONAL TELEPHONE AND TELEGRAPH
CORPORATION



Principal Place of Business

CORPORATION TRUST CENTER
1209 ORANGE STREET
WILMINGTON, DE 19801

Mailing Address

CORPORATION TRUST CENTER
1209 ORANGE STREET
WILMINGTON, DE 19801



02132008 No Chg-P CR2E034 (11/05)

4. FEI Number
51-0273845

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
DUVA, VICTOR A
1209 ORANGE ST
WILMINGTON, DE 19801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TVD
DENNY, CAMILIA M
1209 ORANGE ST.
WILMINGTON, DE 19801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VAS
DENNY, C.M. (ASST-S)
1209 ORANGE ST.
WILMINGTON, DE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVD
UVA, KENNETH J
1209 ORANGE ST.
WILMINGTON, DE 19801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000830371
02/26/08-80081-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President

2/13/2008

Date

302-658-7581

Daytime Phone #