

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

FILED

DOCUMENT # *P01000034447*

1. Entity Name

Kronos Telecom Inc.

02 OCT 21 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

177 North US Hwy One

3. Mailing Address

177 North US Hwy One

Suite, Apt. #, etc.

223

Suite, Apt. #, etc.

223

DO NOT WRITE IN THIS SPACE

City & State

TEQUESTA, FL

City & State

TEQUESTA, FL

4. FEI Number

65-1091382

Applied For

Not Applicable

Zip

33469

Country

USA

Zip

33469

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

STEVEN M. FRIEDMAN

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

11902 SE TIFFANY WAY

City

TEQUESTA

FL

Zip Code

33469

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

Steven M. Friedman, DIRECTOR

10-18-02

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$350.00

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

*D STEVEN M. FRIEDMAN
11902 SE TIFFANY WAY
TEQUESTA, FL 33469*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

*800008564298
10/24/02--01033--005 **150.00*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

*D SOHAIL MARK NATAN
1907 POLO LAKES DRIVE EAST
WELLINGTON, FL 33414*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

*D DAVID R. DRAGON
18753 SE RED APPLE LANE
SUITE 100, FL 33458*

TITLE
NAME
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:

Steven M. Friedman, DIRECTOR *10-18-02* *561-346-6198*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

js 10/22/02