

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000065673

FILED
Mar 12, 2002 8:00 AM
Secretary of State

Entity Name: RBT COMMUNICATIONS, INC.

Current Principal Place of Business:

P.O. BOX 45031
SUNRISE, FL 333450301

New Principal Place of Business:

P.O. BOX 450301
SUNRISE, FL 333450301

Current Mailing Address:

P.O. BOX 45031
SUNRISE, FL 333450301

New Mailing Address:

P.O. BOX 450301
SUNRISE, FL 333450301

FEI Number: 65-1129762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORE, LAURENCE D
2400 EAST COMMERCIAL BLVD. SUITE 709
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOSCIO, ROBERTO
Address: 3257 NW 105 AVE.
City-St-Zip: SUNRISE, FL 333516825

Title: SD () Delete
Name: BOSCIO, IRMA
Address: 3257 NW 105 AVE.
City-St-Zip: SUNRISE, FL 333516825

Title: TD () Delete
Name: BOSCIO, ROBERTO
Address: 3257 NW 105 AVE.
City-St-Zip: SUNRISE, FL 333516825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTO BOSCIO

PD

03/12/2002

Electronic Signature of Signing Officer or Director

Date