

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90486 048 ***150.00

DOCUMENT # P01000083847 1. Entity Name ON THE PHONE, INC.					
Principal Place of Business 5100 N FEDERAL HWY, STE 409 FT LAUDERDALE, FL 33308			Mailing Address 5100 N FEDERAL HWY, STE 409 FT LAUDERDALE, FL 33308		
2. Principal Place of Business 800 W. CYPRESS CREEK RD., Suite, Apt. #, etc. SUITE 470		3. Mailing Address 800 W. CYPRESS CREEK RD., Suite, Apt. #, etc. SUITE 470			
City & State FORT LAUDERDALE, FL		City & State FORT LAUDERDALE, FL		4. FEI Number 65-1131354	
Zip 33309		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEGEL, LARRY 800 W. CYPRESS CREEK RD., STE 470 FORT LAUDERDALE, FL 33309				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____	
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 <u><i>Larry Legel</i></u> LARRY LEGEL 4/30/5 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, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	POST KNASTER, HOWARD 2321 DEER CREEK TRAIL DEERFIELD BCH, FL 33442 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LEGEL, LARRY 800 W. CYPRESS CREEK RD., STE 470 FORT LAUDERDALE, FL 33309 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Larry Legel</i></u> LARRY LEGEL, AS 4/30/5 954 4938900 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					