2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000117166

Entity Name: SPACE TELECOM, INC

FILED Apr 15, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 292 S COUNTY ROAD, STE 109 PALM BCH, FL 33480 **Current Mailing Address: New Mailing Address:** 292 S COUNTY ROAD, STE 109 PALM BCH, FL 33480 FEI Number: 01-0710239 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RICHARD P. GREENE, P.A 2455 E SUNRISE BLVD STE 905 FT LAUDERDALE, FL 33304 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition DE LENCLOS, ALAIN Name: Name: DE LENCLOS, ALAIN 292 S COUNTY ROAD STE 109 292 S COUNTY ROAD STE 109 Address: Address: City-St-Zip: PALM BCH, FL 33480 City-St-Zip: PALM BCH, FL 33480 **VDST** Title: Title: () Delete () Change () Addition Name: RAMPADARUTH, JADOOMANEE Name: 292 S COUNTY ROAD STE 109 Address: Address: City-St-Zip: PALM BCH, FL 33480 City-St-Zip: () Delete Title: (X) Change () Addition Title: MONTANT, JEAN-PIERR MONTANT, JEAN-PIERRE Name: Name: 292 S COUNTY ROAD STE 109 292 S COUNTY ROAD STE 109 Address: Address: PALM BCH, FL 33480 City-St-Zip: PALM BCH, FL 33480 City-St-Zip: Title: CBOD () Delete Title: () Change () Addition RAMPADARUTH, AMAL Name: Name: Address: 292 S COUNTY ROAD STE 109 Address: City-St-Zip: PALM BCH, FL 33480 City-St-Zip: Title: SVPD Title: COO () Delete (X) Change () Addition ENNAHOY, EL HASSAN Name: ZEIMANTZ, JACK Name: 292 S COUNTY ROAD STE 109 Address: 292 S COUNTY ROAD STE 109 Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480 Title: () Delete Title: () Change (X) Addition D'HAUTEFEUILLE, WULFRAN Name: Name: 292 SOUTH COUNTY ROAD SUITE 109 Address: Address: City-St-Zip: City-St-Zip: PALM BEACH, FL 33480

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: RAMPADARUTH AMAL CBOD 04/15/2003