2003

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FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 SEP 25 AM 8:57

DOCUMENT # P02000091421

1. Entity Name

SKYTEL INTERNATIONAL, INC.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5384 JUBILEE WAY	5384 JUBILEE WAY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MARGATE, FL	City & State: MARGATE, FL
Zip: 33063 Country: USA	Zip: 33063 Country: USA

4. FEI Number 05-0533826 ☐ Applied For ☐ Not Applicable

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: GREENE, ELLIOT

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

3405 NW 9TH AVENUE #1201

City: FT. LAUDERDALE **FL** Zip Code: 33309

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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRESIDENT
NAME	PETCA, IOAN
STREET ADDRESS	5384 JUBILEE WAY
CITY-ST-ZIP	MARGATE, FL 33063
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 09-19-2003 954-854-7150

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

September 19, 2003

Uniform Business Report
INC.
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Ref: SKYTEL INTERNATIONAL,
Doc. # P02000091421

Dear Madam/Sir;

I am writing you regarding the UBR form for 2003 that I did not received for some reasons. I am the first year in business and I did not know that I had to file this form and to pay $150.00.
Please accept my apology for not filing and paying on time and accept this payment with the promise that from now on I'll look to file each year on time.
I would like to thank you for your consideration in this matter.

Sincerely,

IOAN PETCA
President