FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR -3 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P24802 (1)

1. Corporation Name

INTEGRETEL, INCORPORATED

Principal Place of Business	Mailing Address
122 SARATOGA SANTA CLARA CA 95051	122 SARATOGA SANTA CLARA CA 95051

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business	2a. Mailing Address
21 5883 Rue Ferrari San-Jose,-Ca.—95138,-USA	26 5883 Rue Ferrari San-Jose,-Ca.—95138-USA
22 Suite, Apt. #, Etc.	27 Suite, Apt. #, Etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

3. Date Incorporated or Qualified: 06/16/1989	3a. Date of Last Report: 03/02/1994
4. FEI Number: 33-0289863	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ (Signature of registered agent) ______ DATE

12. OFFICERS AND DIRECTORS

TITLE	DC
NAME	CASEY, MICHAEL F.
STREET ADDRESS	122 SARATOGA
CITY-ST-ZIP	SANTA CLARA CA
TITLE	DP
NAME	CANNON, STEPHEN D.
STREET ADDRESS	122 SARATOGA
CITY-ST-ZIP	SANTA CLARA CA
TITLE	SDV
NAME	DAWSON, KEN R.
STREET ADDRESS	122 SARATOGA
CITY-ST-ZIP	SANTA CLARA CA
TITLE	TDV
NAME	MERTZ, JOHN K.
STREET ADDRESS	122 SARATOGA
CITY-ST-ZIP	SANTA CLARA CA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	DC	☒ Change ☐ Addition
1 2 NAME	CASEY, MICHAEL F.	
1 3 STREET ADDRESS	5883 Rue Ferrari	
1 4 CITY-ST-ZIP	San Jose, Ca. 95138	
2 1 TITLE	DP	☒ Change ☐ Addition
2 2 NAME	CANNON, STEPHEN D.	
2 3 STREET ADDRESS	5883 Rue Ferrari	
2 4 CITY-ST-ZIP	San Jose, Ca. 95138	
3 1 TITLE	SDV	☒ Change ☐ Addition
3 2 NAME	DAWSON, KEN R.	
3 3 STREET ADDRESS	5883 Rue Ferrari	
3 4 CITY-ST-ZIP	San Jose, Ca. 95138	
4 1 TITLE	DV	☒ Change ☐ Addition
4 2 NAME	MERTZ, JOHN K.	
4 3 STREET ADDRESS	5883 Rue Ferrari	
4 4 CITY-ST-ZIP	San Jose, Ca. 95138	
5 1 TITLE	TDV	☐ Change ☒ Addition
5 2 NAME	HENRY, JOHN D.	
5 3 STREET ADDRESS	5883 Rue Ferrari	
5 4 CITY-ST-ZIP	San Jose, Ca. 95138	
6 1 TITLE		☐ Change ☐ Addition
6 2 NAME		
6 3 STREET ADDRESS		
6 4 CITY-ST-ZIP		

14. [illegible] ... for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address ... [illegible]

SIGNATURE: ______ (Signature and typed or printed name of signing officer or director) ______ Date ______ Daytime Phone #

0482007 FP