

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P24802**

Corporation Name

INTEGRETEL, INCORPORATED

FILED
Sep 13, 1999 8:00 am
Secretary of State

09-13-1999 90004 041 ***550.00



Principal Place of Business

**183 RUE FERRARI
SAN JOSE CA 95138**

S

Mailing Address

**5883 RUE FERRARI
SAN JOSE CA 95138
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/16/1989

Principal Place of Business

2a. Mailing Address

26

4. FEI Number

33-0289863

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

City & State

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Zip

Country

29

Zip

Country

30

8. This corporation owes the current year
Intangible Personal Property.

Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

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

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

VP	<input type="checkbox"/> DELETE
PHILBIN, BRENDAN	
5883 RUE FERRARI	
SAN JOSE CA 95138	
PSD	<input type="checkbox"/> DELETE
DAWSON, KEN	
5883 RUE FERRARI	
SAN JOSE CA 95138	
SV	<input checked="" type="checkbox"/> DELETE
DAWSON, KEN R	
5883 RUE FERRARI	
SAN JOSE CA	
	<input type="checkbox"/> DELETE
	<input type="checkbox"/> DELETE
	<input type="checkbox"/> DELETE

1.1 TITLE	VP, Operations	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	PHILBIN, BRENDAN	
1.3 STREET ADDRESS	5883 RUE FERRARI	
1.4 CITY-ST-ZIP	SAN JOSE, CA 95138	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	JOE LYNAM	
3.3 STREET ADDRESS	5883 RUE FERRARI	
3.4 CITY-ST-ZIP	SAN JOSE, CA 95138	
4.1 TITLE	VP, FINANCE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	EVAN MEYER	
4.3 STREET ADDRESS	5883 RUE FERRARI	
4.4 CITY-ST-ZIP	SAN JOSE, CA 95138	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 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.

SIGNATURE:

Brendan Philbin

8/19/99

(408) 362-4080

CR2E034 (5/99)