

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P38938** (7)  
1. Corporation Name  
**US WATS ENTERPRISES, INC.**

Principal Place of Business <b>111 PRESIDENTIAL BLVD. SUITE 114 BALA CYNWYD PA 19004 US</b>	Mailing Address <b>111 PRESIDENTIAL BLVD. SUITE 114 BALA CYNWYD PA 19004 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>05/22/1992</b>	
21		26		4. FEI Number <b>22-3055962</b>	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip		Zip			
24		29			
Country		Country			
25		30			

9. Name and Address of Current Registered Agent <b>THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301</b>				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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	O'HARE, KEVIN			1.2 NAME	Stephen Parker		
STREET ADDRESS	111 PRESIDENTIAL BLVD.			1.3 STREET ADDRESS			
CITY-ST-ZIP	BALA CYNWYD PA 19004			1.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PARKER, STEPHEN			2.2 NAME			
STREET ADDRESS	ARBORDEAU 10F			2.3 STREET ADDRESS			
CITY-ST-ZIP	DEVON PA			2.4 CITY-ST-ZIP			
TITLE	CFO	<input type="checkbox"/> DELETE		3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SHANNON, CHRISTOPHER			3.2 NAME	Michael McAnulty		
STREET ADDRESS	111 PRESIDENTIAL BLVD			3.3 STREET ADDRESS			
CITY-ST-ZIP	BALA CYNWYD PA			3.4 CITY-ST-ZIP			
TITLE	CEO	<input checked="" type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	O'HARE, KEVIN			4.2 NAME			
STREET ADDRESS	111 PRESIDENTIAL BLVD, STE. 114			4.3 STREET ADDRESS			
CITY-ST-ZIP	BALA CYNWYD PA			4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME				5.2 NAME	Aaron Brown		
STREET ADDRESS				5.3 STREET ADDRESS	111 Presidential Blvd, Ste 114		
CITY-ST-ZIP				5.4 CITY-ST-ZIP	Bala Cynwyd, PA 19004		
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. 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:  Stephen Parker 4/2/98 610 660 0100

CR2E034 (10/97)