

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

FILED

Mar 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P39527 (7)
1. Corporation Name
WINSTAR GATEWAY NETWORK, INC.

Principal Place of Business 6585 N STEMMONS FRWY STE 1100 S DALLAS TX 75247 US	Mailing Address 6585 N STEMMONS FRWY STE 1100 S DALLAS TX 75247 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 07/01/1992		4. FEI Number 75-2429676		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8.75 Additional Fee Required		5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH 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			
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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	D	NAME	GRAHAM, TIMOTHY	1.1 TITLE	D	1.2 NAME	Graham, Timothy
STREET ADDRESS		230 PARK AVE STE 3126		1.3 STREET ADDRESS		230 Park Ave #2700	
CITY-ST-ZIP		NEW YORK NY		1.4 CITY-ST-ZIP		NY, NY 10169	
TITLE	P	NAME	SCHMIEG, DAVID	2.1 TITLE		2.2 NAME	Schmieg, David
STREET ADDRESS		7799 LEESBURG PIKE, STE 1001 N		2.3 STREET ADDRESS		1577 Springhill Rd - 6th FL	
CITY-ST-ZIP		TYSONS CORNER VA		2.4 CITY-ST-ZIP		Vienna, VA 22182	
TITLE	VP	NAME	ALLEN, RICHARD O	3.1 TITLE	AS	3.2 NAME	Kenneth J Zinghini
STREET ADDRESS		8585 N STEMMONS FRWY, STE 1100 S		3.3 STREET ADDRESS		230 Park Ave #2700	
CITY-ST-ZIP		DALLAS TX		3.4 CITY-ST-ZIP		NY, NY 10169	
TITLE	D	NAME	VON STRANGE, FREDRIC E	4.1 TITLE	AS	4.2 NAME	Steven Mc Leman
STREET ADDRESS		10 REDMOND LANE		4.3 STREET ADDRESS		1577 Springhill Rd - 6th	
CITY-ST-ZIP		OYSTER BAY COVE NY		4.4 CITY-ST-ZIP		Vienna, VA 22182	
TITLE	T	NAME	SCHWARZ, KEN	5.1 TITLE	T	5.2 NAME	Kenneth Schwarz
STREET ADDRESS		7799 LEESBURG PIKE, STE 1001 N		5.3 STREET ADDRESS		1577 Springhill Rd - 6th FL	
CITY-ST-ZIP		TYSONS CORNER VA		5.4 CITY-ST-ZIP		Vienna, VA 22182	
TITLE	AS	NAME	BRADLEY, KIMBERLEY A	6.1 TITLE		6.2 NAME	
STREET ADDRESS		8585 N STEMMONS FRWY, STE 1100 S		6.3 STREET ADDRESS			
CITY-ST-ZIP		DALLAS TX		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: *Star Mc Leman* 2/5/98 703-645-5155

CR2034 (10/97)