

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P93000002571 (6)

1. Corporation Name

MIAMI INTERNATIONAL TELEPORT, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 16 PM 3:38

Principal Place of Business

C/O MARK D. COHEN, P.A.
121 S.E. 1ST ST., SUITE 600
MIAMI FL 33131

Mailing Address

C/O MARK D. COHEN, P.A.
121 S.E. 1ST ST., SUITE 600
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
01/12/1993

3a. Date of Last Report
02/15/1994

4. FEI Number
65-0449797

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

2. Principal Place of Business

21. c/o Mark D. Cohen, P.A.

2a. Mailing Address

26. c/o Mark D. Cohen, P.A.

Suite, Apt. #, etc.

22. 4651 Sheridan St., #300

Suite, Apt. #, etc.

27. 4651 Sheridan St., #300

City & State

23. Hollywood, FL

City & State

28. Hollywood, FL

Zip

24. 33021

Country

25. USA

Zip

29. 33021

Country

30. USA

9. Name and Address of Current Registered Agent

COHEN, MARK D
121 S.E. 1ST ST.
SUITE 600
MIAMI FL 33131

10. Name and Address of New Registered Agent

81. Name
Mark D. Cohen, Esq.
82. Street Address (P.O. Box Number is Not Acceptable)
c/o Mark D. Cohen, P.A.
83. 4651 Sheridan Street, Ste. 300
84. City
Hollywood, FL
85. Zip Code
33021

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, within 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 agree to the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Mark D. Cohen, Esq.

2/13/95

(Signature of Registered Agent must be filed with this report)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE
D
1.2 NAME
COHEN, MARK D
1.3 STREET ADDRESS
121 S.E. 1ST STREET, # 600
1.4 CITY-ST- ZIP
MIAMI FL 33131

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST- ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY-ST- ZIP

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY-ST- ZIP

9.1 TITLE

9.2 NAME

9.3 STREET ADDRESS

9.4 CITY-ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
D
1.2 NAME
COHEN, MARK D.
1.3 STREET ADDRESS
4651 Sheridan Street, Ste. 300
1.4 CITY-ST- ZIP
Hollywood, FL 33021

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST- ZIP

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5.4 CITY-ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST- ZIP

7.1 TITLE
7.2 NAME
7.3 STREET ADDRESS
7.4 CITY-ST- ZIP

8.1 TITLE
8.2 NAME
8.3 STREET ADDRESS
8.4 CITY-ST- ZIP

14. I hereby certify that the information submitted with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 110.07(3)(b), Florida Statutes. I further certify that the information included 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 person or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report as an attachment with an address.

SIGNATURE: X

(Signature and Title or Printed Name of Signing Officer or Director)

MARK D. COHEN, ESQ.

2/13/95

(305)962-8889

(Typed Name)