

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90027 022 ***150.00

DOCUMENT # P93000011467

1. Corporation Name
GTI TELECOM, INC.

Principal Place of Business

507 NORTH NEW YORK AVE
SECOND FLOOR
WINTER PARK FL 32789

Mailing Address

507 NORTH NEW YORK AVE
SECOND FLOOR
WINTER PARK FL 32789

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/15/1993

4. FEI Number

59-3166693

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 5080 Tuttle Crossing Blvd
Suite, Apt. #, etc.

2a. Mailing Address

26 5080 Tuttle Crossing Blvd
Suite, Apt. #, etc.

City & State

23 Dublin, OH

Zip Country

24 43016-3566 25 USA

City & State

28 Dublin, OH

Zip Country

29 43016-3566 30 USA

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

CEOD OK
SPANGENBERG, ERICH L
5080 TUTTLE CROSSING
DUBLIN OH 43017 ☐ DELETE

PTD
LINDAUER, JEFFREY L
5080 TUTTLE CROSSING
DUBLIN OH 43017 ☒ DELETE

SD
BEREDAY, THADDEUS
5080 TUTTLE CROSSING
DUBLIN OH 43017 ☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ☒ Change ☐ Addition

2.1 TITLE 2.2 NAME OK
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP Dublin, OH 43016-3566 ☐ Change ☒ Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ☒ Change ☐ Addition

4.1 TITLE 4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP Dublin, OH 43016-3566 ☐ Change ☒ Addition

5.1 TITLE 5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP Dublin, OH 43016-3566 ☐ Change ☒ Addition

6.1 TITLE 6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP Dublin, OH 43016-3566 ☐ Change ☒ Addition

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/99

Date

614-789-3600

Daytime Phone #

CR2E034 (1/98)