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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

## 1996

P93000014737 (9)

DOCUMENT # GLOBAL TELECOM NETWORK, INC. Principal Place of Business Mailing Address POST OFFICE BOX 290763 POST OFFICE BOX 290763 DAVIE FL 33319 **DAVIE FL 33319** 3. Date Incorporated or Qualified 3a. Date of Last Report 02/17/1993 09/25/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 65-0390475 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be  $\Box$ 23 28 Trust Fund Contribution Added to Fees Ziρ Zip Country 8. This corporation has liability for intangible tax under s 199,032, 24 30 25 29 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHECHTMAN, JENNIFER L 82 Street Address (P.O. Box Number is Not Acceptable) 9050 PINES BLVD. SUITE 385-A 83 PEMBROKE PINES FL 33024 84 City Zip Code 85 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) (12/95)12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1. 1 TITLE Change [ ] Addition PASTERNAK, CAROL NAME 1.2 NAME **CR2E034** 101 S.W. 63RD TERRACE STREET ADDRESS 1.3 STREET ADDRESS **PLANTATION FL 33317** CHTY - S1 - ZIP 1.4 CITY - ST - ZIP TITLE TT DELETE 2 1 TITLE ☐ Change Addition PASTERNAK, BARRY NAME 22 NAME 101 S.W. 63RD TERRACE STREET ADDRESS 2.3 STREET ADDRESS **PLANTATION FL 33317** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE THILE 3.1 TITLE ☐ Change ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-S1-ZIP 3.4 CITY - ST-ZIP TITLE DELETE 4. 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP TITLE DELETE 5 1 TITLE ☐ Change ■ Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6. 1 TITLE Change ☐ Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - \$1 - 7(P 6.4 CITY - ST- ZIP

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(K). Fiorida 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 12 fightenged, or on an extent ment with an address. CAROL PASKENUK, DIR 420/96 (234)797-6345 SIGNATURE: -(