FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 3:58
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000028192 (1)**

1. Corporation Name
UNIVERSAL TELECOM INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
2 WEST AVENUE A BELLE GLADE FL 33430	2 WEST AVENUE A BELLE GLADE FL 33430

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/15/1993
3a. Date of Last Report: 05/17/1994

2. Principal Place of Business	2a. Mailing Address
21 8 West Avenue A"	26 8 West Ave A"
Suite, Apt. #, etc. 22 Belle Glade FL 33430	Suite, Apt. #, etc. 27 Belle Glade FL 33430
City & State 23 33430	City & State 28 33430
Zip 24 33430 Country 25 USA	Zip 29 33430 Country 30 USA

4. FEI Number: 65-0488809 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BERTRAM, KEVIN C 2 WEST AVENUE A BELLE GLADE FL 33430	81 Name: Kevin C Bertram 82 Street Address (P.O. Box Number is Not Acceptable): 8 West Ave A" 83 84 City: Belle Glade FL 85 Zip Code: 33430

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Kevin C Bertram — 5-9-95
(Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD	11 TITLE	☒ Change ☐ Addition PSTD
NAME	BERTRAM, KEVIN C	12 NAME	BERTRAM Kevin C
STREET ADDRESS	4035 SW 15TH STREET #F303	13 STREET ADDRESS	65 NE 10th Street
CITY ST ZIP	POMPANO BEACH FL 33069	14 CITY ST ZIP	Pompano Beach FL 33060
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY ST ZIP		24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition 200001489972
NAME		32 NAME	-05/17/95--01018--018
STREET ADDRESS		33 STREET ADDRESS	****225.00 ****225.00
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	5-1-95 t.s
CITY ST ZIP		64 CITY ST ZIP	

14. I do 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)(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: Kevin C Bertram — Kevin C Bertram 5-9-95
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date

Daytime Phone: 305-971-8909

0202031 CP