SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT **1996**

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

P93000058923

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 SEP -6 PM 2: 11

DOCUMENT # P93000058923 Amended

1. Corporation Name: Fax Exchange, Inc.

Principal Place of Business: 9200 S. Dadeland Blvd. Suite 825 Miami, Florida 33156
Mailing Address: — Same —

2. Principal Place of Business (21)	Same
Suite, Apt. #, etc (22)	Same
City & State (23)	Same
Zip (24)	Same
Country (25)	USA
2a. Mailing Address (26)	Same
Suite, Apt. #, etc (27)	Same
City & State (28)	Same
Zip (29)	Same
Country (30)	USA

3. Date Incorporated or Qualified: Aug 23, '93
3a. Date of Last Report: Jan, '96
4. FEI Number: 65-0476177 ☐ 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

Jacob Fishman
1385 NW 15 Street
Miami, Florida

10. Name and Address of New Registered Agent

81 Name: G. David O'Leary
82 Street Address (P.O. Box Number is Not Acceptable): 9200 S. Dadeland Blvd.
83 Suite 825
84 City: Miami, FL 85 Zip Code: 33156

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: G. David O'Leary [signature] DATE: Sept. 3, '96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	Robert M. Burke III	9200 S. Dadeland Blvd.	Ste. 825; Miami, Fla. 33156	☐
	N/A			☐
	N/A			☐
	N/A			☐
	N/A			☐
	N/A			☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

#	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
1	D/P/S	Robert M. Burke III	9200 S. Dadeland Blvd.	Ste. 825; Miami, Fla. 33156	☒	☐
2	D/T	Jeanette King-Burke	9200 S. Dadeland Blvd.	Ste. 825; Miami, Fla. 33156	☐	☒
3		N/A			☐	☐
4		N/A			☐	☐
5		N/A			☐	☐
6		N/A			☐	☐

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CR2E034 (3/96)

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)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Robert M. Burke III, President/Secretary-Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: Sept 3, 96 Daytime Phone #: (305) 670-3025