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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300083631 (0)

PHONECARD EXPRESS, INC.

## FILED Apr 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

				12/07/1993		
2. Principal Place of Business		2s. Mailing Address		4. FEI Number	Applied For	
21 26		26		65-0452576	Not Applicable	
Suite, Apt. #, etc. Suite, Ap		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & Stat	10	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Ζιp	Country	8. This corporation owes or has paid the c	urrent year Intangible	
24	25	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No	
	Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent					
	JTTLER, MATT		81 Name	TTK, MOH		
150 SE 25TH RD #2K				82 Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33129				4381 COSPER COURT		
			83			
			<u> </u>		<u> </u>	
			84 City /	to llywood FI	85 Zip Code 7	
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, typod or printed name of registered ag	ent and title if applicable (No	OTE: Registered Agent signature require	ed when reinstating) DATE		
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	
TITLE	TDP	☐ DEL <b>ete</b>	1.1 TITLE	1	Change Addition	
NAME	KUTTLER, MATT		1.2 NAME	KITTER, MATI		
STREET ADDRESS 150 SE 25TH ROAD #2K			1.3 STREET ADDRESS	4381 CASPE-COURT		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	KITTLER, MOTH 4381 CASPERCEUTY Hollywood, FL 3304		
TITLE	DST	DELETE		- 1	Change Addition	
NAME	REDLICH, DAVID		2.2 NAME	Redich, David Terrace 1020 SW 93rd Terrace Phototon, FL 33324	, , , _	
STREET ADDRESS	3119 NE 207TH ST #2301		2.3 STREET ADDRESS	1020 SW 9378 TETTE		
CITY-ST-ZIP	NORTH MIAMI BEACH FL		2. 4 CITY-ST-ZIP	Pleatation FL 33324		
TITLE	DV	DELETE	3.1 TITLE	7 13.1141.07,	Change Addition	
NAME	ROSENBERG, TOM	<del></del>	3.2 NAME			
STREET ADDRESS	CUNKANUGA ROAD		3.3 STREET ADDRESS			
	HENDERSONVILLE NC					
CITY-ST-ZIP TITLE	DV	DELETE	3.4. CITY- ST-ZIP 4.1 TITLE		Change Addition	
NAME	POPKIN, MARY ANN	L VICEIL	4.2 NAME	POPKIN, MARY AM	=	
	5400 NORTH 35 ST.		4. Z IMMIE	2595 Sherian street, SIK 16	٧ <del>٦</del>	
STREET ADDRESS	HOLLYWOOD FL 33021		4.3 STREET ADDRESS	Polikin, Mary Am 3595 Sherian Street, Suic K Hollywood, FL 33021		
CITY-ST-ZIP TITLE	11000110001	☐ DELETE		INTERVITOR SOUTH	Change Addition	
		☐ vereit	5.1 TITLE		C oligings C MODITION	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		Decesé	5.4 CITY-ST-ZIP		——————————————————————————————————————	
TITLE		☐ DELETÉ	6 1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6 4 CITY-ST-ZIP			
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 cath; 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 opy an attachment with an address.						
Mat 111 - 5214						