

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

APPROVED:
Amended AND
FILED

97 OCT 27 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P94000019585 (6)*

1. Corporation Name

INTERNATIONAL DIGITAL Telecommunications, Inc.

Principal Place of Business

Mailing Address

1020 NW 6TH ST, Bldg H+I

1020 NW 6TH ST, Bldg H+I

Deerfield BEACH, FL 33442

*Deerfield BEACH, FL
33442.*

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Incorporated or Qualified

3a. Date of Last Report

3/14/94

5/1/97

4. FEI Number

Applied For

58-9147278

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

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

*Stephen M. Goodman
1020 NW 6TH ST, Bldg H+I
Deerfield BEACH, FL 33442*

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 re-stating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE *PD* ☐ DELETE
NAME *Sherylene HAMMETT*
STREET ADDRESS *1020 NW 6TH ST, Bldg H+I*
CITY-ST-ZIP *Deerfield BEACH, FL 33442.*

1.1 TITLE *ST* ☒ Change ☐ Addition
1.2 NAME *SHAYLENE HAMMETT*
1.3 STREET ADDRESS *1020 NW 6TH ST, Bldg H+I*
1.4 CITY-ST-ZIP *Deerfield BEACH, FL 33442*

TITLE *ST* ☐ DELETE
NAME *DENISE BATTISTA*
STREET ADDRESS *1020 NW 6TH ST, Bldg H+I*
CITY-ST-ZIP *Deerfield BEACH, FL 33442*

2.1 TITLE *PD* ☒ Change ☐ Addition
2.2 NAME *DENISE BATTISTA*
2.3 STREET ADDRESS *1020 NW 6TH ST, Bldg H+I*
2.4 CITY-ST-ZIP *Deerfield BEACH, FL 33442*

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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

SIGNATURE:

Denise Battista

10/21/97

1-800-984-2660

CR2E034 (9/96)