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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000034340 (7)

1. Corporation Name

WORLD TELEX AND FAX NETWORK, INC.



Principal Place of Business

Mailing Address

925 ARTHUR GODFREY ROAD
SUITE 200
MIAMI BEACH FL 33140

925 ARTHUR GODFREY ROAD
SUITE 200
MIAMI BEACH FL 33140

3. Date Incorporated or Qualified

05/06/1994

3a. Date of Last Report

04/25/1995

2. Principal Place of Business

2a. Mailing Address

21 960 ARTHUR GODFREY ROAD
Suite, Apt. #, etc.

26 960 ARTHUR GODFREY ROAD
Suite, Apt. #, etc.

22 SUITE # 106

27 SUITE # 106

23 MIAMI BEACH, FL
City & State

28 MIAMI BEACH FL
City & State

24 33140
Zip

Country

25 DADE
Zip

Country

29 33140
30 DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BITBOL, JULES G.
925 ARTHUR GODFREY ROAD
STE 200
MIAMI BEACH FL 33140

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

960 ARTHUR GODFREY ROAD

83

SUITE 106

84

MIAMI BEACH

FL

85 Zip Code

33140

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME BITBOL, JULES G
STREET ADDRESS 925 ARTHUR GODFREY ROAD, SUITE 200
CITY - ST - ZIP MIAMI BEACH FL 33140

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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STREET ADDRESS
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STREET ADDRESS
CITY - ST - ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

960 ARTHUR GODFREY ROAD
SUITE 106
MIAMI BEACH, FL 33140

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96

(305) 534-6105

CR2E034 (12/95)