

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **p940000 49522**

1. Entity Name

INTERNATIONAL FIBERCOM - PREM, INC.

FILED

01 JUL 17 AM 8:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500004533765--1

-08/14/01--01043--021

****550.00 ****550.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

2. Principal Place of Business

3410 E. UNIVERSITY DR

Suite, Apt. #, etc.

STE 180

City & State

PHOENIX

AZ

Zip

85034

Country

MARICOPA

3. Mailing Address

3410 E. UNIVERSITY DR

Suite, Apt. #, etc.

STE 180

City & State

PHOENIX

AZ

Zip

85034

Country

MARICOPA

4. FEI Number

65-0503406

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

CT CORPORATION SYSTEM

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

1200 S PINE ISLAND RD

City

PLANTATION

FL

Zip Code

33324

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

C T Corporation System

SIGNATURE *Vickie M. Prince*

Vickie M. Prince, Asst. Secy.

July 13, 2001

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP CHAIRMAN OF THE BOARD/PRESIDENT ☐ Change ☒ Addition
JOSEPH P. KEALY
3410 N UNIVERSITY DR STE 180
PHOENIX AZ 85034

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP PRESIDENT ☐ Change ☒ Addition
MICHAEL N. JOHNSON
6801 LAKE WORTH RD STE 350
LAKE WORTH FL 33467

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP SECRETARY/TREASURER ☐ Change ☒ Addition
GREGORY B. HILL
3410 N UNIVERSITY DR STE 180
PHOENIX AZ 85034

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ASSISTANT SECRETARY ☐ Change ☒ Addition
ANTHONY BAUMANN
3410 N UNIVERSITY DR STE 180
PHOENIX AZ 85034

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP DIRECTOR ☐ Change ☒ Addition
JOSEPH P. KEALY
3410 N UNIVERSITY DR STE 180
PHOENIX AZ 85034

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP DIRECTOR ☐ Change ☒ Addition
GREGORY B. HILL
3410 N UNIVERSITY DR STE 180
PHOENIX AZ 85034

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GREGORY B. HILL GREGORY B. HILL, Director

7-11-01

602-387-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)