

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90739 017 ***150.00

DOCUMENT # P94000058940

1. Entity Name
DELTACOM CORPORATION



Principal Place of Business
1031 IVES DAIRY RD.
SUITE 228
N MIAMI BEACH FL 33179

Mailing Address
1031 IVES DAIRY RD.
SUITE 228
N MIAMI BEACH FL 33179

2. Principal Place of Business
1221 BRICKELL AVE

3. Mailing Address
1221 BRICKELL AVE

Suite, Apt. #, etc.
SUITE 900

Suite, Apt. #, etc.
SUITE 900

City & State
MIAMI, FL

City & State
MIAMI FL

Zip
33131

Country
USA

Zip
33131

Country
USA

4. FEI Number 65-0510898

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

RIBEIRO, MARCO A
1031 IVES DAIRY RD
SUITE 228
N MIAMI BEACH FL 33179

7. Name and Address of New Registered Agent

Name
MARCO A S RIBEIRO
Street Address (P.O. Box Number is Not Acceptable)
1221 BRICKELL AVE
SUITE 900
City
MIAMI FL Zip Code
33131

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **MARCO A.S. RIBEIRO** **PRESIDENT** **04-01-03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May-1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution. ☐

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRES
RIBEIRO, MARCO A PRES ☐ Delete
R CDOR LUIS J P QUEIROZ 170-AP 141B
CAMPINAS, SP BRAZIL SP 13020-080

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P ☒ Change ☐ Addition
MARCO A. S. RIBEIRO
RUA FERNANDO COSTA 177
CAMPINAS, SP BRAZIL 13026-360

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
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CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **SIGNATURE MARCO A.S. RIBEIRO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-01-03 **(305) 4363669**
Date Daytime Phone #

CR2E034 (10/02)