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CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # P94000062898

1. Corporation Name
TELEPHONE UNLIMITED, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
750 Marine Drive Boca Raton, FL 33431	Same

3. Date Incorporated or Qualified: 08/22/94
3a. Date of Last Report:

2. Principal Place of Business (21)	2a. Mailing Address (26)	4. FEI Number: 65-0511981	☐ Applied For ☐ Not Applicable
Suite Apt. #, etc. (22)	Suite, Apt. #, etc. (27)	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State (23)	City & State (28)	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip (24) / County (25)	Zip (29) / County (30)	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
David J. Menkhaus, Esquire Moore & Menkhaus, P.A. 4800 N. Federal Highway Suite 210-A Boca Raton, FL 33431	01 Name 02 Street Address (P.O. Box Number is Not Acceptable) 03 04 City FL 05 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] David J. Menkhaus 4/28/95
Signature of typed name of registered agent and title of officer if applicable — (NOTE: Registered Agent's signature required when mandatory) — Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Pres/VP/Treas	11 TITLE	☐ Change ☐ Addition
NAME	Dean S. Katzin, M.D.	12 NAME	
STREET ADDRESS	7280 W. Palmetto Park Road, Suite 101	13 STREET ADDRESS	
CITY ST ZIP	Boca Raton, FL 33433	14 CITY ST ZIP	
TITLE	Sec.	21 TITLE	☐ Change ☐ Addition
NAME	Frank Vidal	22 NAME	
STREET ADDRESS	18340 N.W. 68th Avenue, Suite G	23 STREET ADDRESS	
CITY ST ZIP	Miami, FL 33015-3431	24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

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)(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: [signature] Dean S. Katzin, M.D. 4/28/95 (407) 368-5437
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number