COF ANNU	PROFIT RPORATION JAL REPORT 1999		Kather Secreta	RTMENT OF STATE Ine Harris ry of State CORPORATIONS	Secretar	999 8:00 am y of State 012 011 ***550.00
DOCU 1. Corporation		94000069	9345			
NATION	IAL TELECOM US	sa, inc.				
Principal Plac 777 E ATLAN	e of Business		ing Address L J. DALTON. CPA			
STE 100 124 N. MAIN STREET DELRAY BCH FL 33483 FORKED RIVER NJ 08731-3 US				3634		
05					3. Date Incorporated or Qualified 09/19/1994	
2. Principal F	Place of Business		Mailing Address	NE STOLBA	4. FEI Number 65-052 1493	Applied For Not Applicable
Suite, Apt.	.#, etc		Suite, Apt. #, etc.			\$8.75 Additional
2 Stat	TE 103		075 MOK	RIS AVE	6. Election Campaign Financing	Fee Required \$5.00 May Be
DET DET	LRAY BEAC	H FL 28 3	SPRINGFIE		Trust Fund Contribution	Added to Fees
4 33	483 25 1)	SA 29	¹⁰ 0 7081	Country 30 USA	 This corporation owes the current Intangible Personal Property. 	year Yes No
		ess of Current Registe	red Agent	81 Name	10. Name and Address of New Reg	istered Agent
	ig, brian e				KING, BRIAN E Address (P.O. Box Number is Not Acceptable	· · · · · · · · · · · · · · · · · · ·
	Y E ATLANTIC AVE				500 GULF STRE	AM BLVD
	LRAY BCH FL 33483			83	STE 103	
			<u></u>	84 City	DELRAY BEALH	FL ⁸⁵ ^{Zip Code} 33483
 Pursuan office or agent. I 	It to the provisions of sec registered agent, or bot am familiar with, and ac	tions 607.0502 and 607 h, in the State of Florida cept the obligations of	1508, Florida Statute Such change was a Section 607.0505, Flo	s, the above-named c authorized by the corp orida Statutes.	orporation submits this statement for the purpor oration's board of directors. I hereby accept the	use of changing its registered $7 - 15 - 99$
SIGNATURE		e of registered agent and title if a	pplicable. (NO	TE: Registered Agent signatu	re required when reinstating)	CATE .
12.		OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
	KING,-BRIAN E-			1.2 NAME	- CLUE STREAM	
STREET ADDRESS	777 E Atlantic / Delray BCH FL :			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	500 GULF STREAM DELRAY BEACH, P	BLVD #103 2 33483
UTY-ST-ZIP	SD			2.1 TITLE	Bedlerry Benett, P	Change Addition
	STOLBACH, DIAN 675 MORRIS AVEI			2.2 NAME		
TREET ADDRESS	SPRINGFIELD NJ			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE			DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
IAME				3.2 NAME 3.3 STREET ADDRESS		
ITY-ST-ZIP				3.4 CITY-ST-ZIP		
ITLE			DELETE	4.1 TITLE 4.2 NAME		Change Addition
STREET ADDRESS				4.3 STREET ADDRESS		
	<u> </u>	<u></u>		4.4 CITY-ST-ZIP		
	· · · · · · · · · · · · · · · · · · ·			5.1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS				5.3 STREET ADDRESS		
				5.4 CITY-ST-ZIP	,	
ITLE				6.1 TITLE 6.2 NAME		Change Addition
STREET ADDRESS				6.3 STREET ADDRESS		
XTY-ST-ZIP	ortific that the information	a numbind with this fill	doos not qualify for the	6.4 CITY-ST-ZIP	spotion 110 07/21/i) Elanda Clathera I funt	applify that the information
I NELEDV C	erary unactine information	i soppred with this ming	aces not quality for th	e exemption stated in	section 119.07(3)(i), Florida Statutes. I further	ceruly unat the information
indicated (an officer	or director of the corporation	ation or the receiver or t	rustee empowered to	ate and that my signa execute this report a	ture shall have the same legal effect as if ma s required by Chapter 607, Florida Statutes, a	de under oath; that I am
indicated (an officer	or director of the corporation	supplemental annual relation or the receiver or t	rustee empowered to	ate and that my signa execute this report a	s required by Chapter 607, Florida Statutes; a	nd that my name appears
indicated (an officer	or director of the corpora 2 or Block 13 if changed	ation or the receiver or t I, or on an attachment w	rustee empowered to	execute this report a	s required by Chapter 607, Florida Statutes; a	de under oath; that I am Ind that my name appears 521-243-179 Davime Phone #