


FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90218 001 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000019896

1. Corporation Name

IGT TELECOMMUNICATIONS GROUP, INC.

Principal Place of Business 1111 LINCOLN ROAD 4TH FLOOR MIAMI BEACH FL 33139	Mailing Address 1111 LINCOLN ROAD 4TH FLOOR MIAMI BEACH FL 33139
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/10/1995	
21 600 NE 36th Street	26 600 NE 36th Street	4. FEI Number 65-0571144		Applied For Not Applicable	
22 Miami, FL	27 Miami, FL	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	28	6. Election Campaign Financing <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 33137	25 U.S.	29 33137		30 U.S.	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			

MECHANIC, ROY M
 1111 LINCOLN ROAD, 4TH FLOOR
 MIAMI BEACH FL 33139

81 Name **Monard Vincent W.**
 82 Street Address (P.O. Box Number is Not Acceptable)
600 NE 36th Street
 83 **Miami, FL 33137**
 84 City **FL** 85 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5/17/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T	1.1 TITLE	Treasurer
NAME	MECHANIC, ROY	1.2 NAME	Monard, Vincent
STREET ADDRESS	1111 LINCOLN RD	1.3 STREET ADDRESS	600 NE 36th Street
CITY-ST-ZIP	MIAMI BEACH FL 33139	1.4 CITY-ST-ZIP	Miami, FL 33137
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE:

Vincent W. Monard
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vincent Monard

4/28/99 (305) 573-2800
 Date Daytime Phone #

CR2E034 (11/98)