


**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 19, 2003 8:00 am
Secretary of State

03-19-2003 90103 012 ***150.00

DOCUMENT # **P95000027377**

1. Entity Name
TELEMONDE COMMUNICATIONS, INC.



Principal Place of Business
~~129 AVE A~~
MARATHON FL 33050
US

Mailing Address
~~129 AVE A~~
MARATHON FL 33050
US

2. Principal Place of Business
6179 OVERSEAS HWY
Suite/Apt. #, etc.

3. Mailing Address
6179 OVERSEAS HWY
Suite/Apt. #, etc.

City & State

Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0574462** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

WHEELER, ROBERT D
~~129 AVE A~~
MARATHON FL 33050

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
6179 OVERSEAS HWY

City **FL** Zip Code

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 *Robert Wheeler* DATE **3/14/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	WHEELER, ROBERT D	
STREET ADDRESS	129 AVE A 6179 OVERSEAS HWY	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE	VST	<input type="checkbox"/> Delete
NAME	WHEELER, JUNE R	
STREET ADDRESS	129 AVE A 6179 OVERSEAS HWY	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TELE129 330503320 1702 12 01/09/03
NOTIFY SENDER OF NEW ADDRESS
:TELEMONDE COMMUNICATIONS
6179 OVERSEAS HWY
MARATHON FL 33050-2724



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: *Robert Wheeler* DATE: **3/14/03** 3057435114

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)