FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000042409 (9) ACTIVITEL CORPORATION

Mailing Address

FILED Jun 13 1997 8:00am Secretary of State



8610 RIDGEWOOD DRIVE BOCA RATON FL 83434		BOCA RATON FL 33434-	3610 BRIDGEWOOD DRIVE BOCA RATON FL 33434-4126				
		U\$			3. Date Incorporated or Qualified 05/31/1995	3a. Date of Last Report 05/30/1996	
2. Principal Pla	ace of Business	2a, Mailing Address	2a, Mailing Address		4. FEI Number	Applied For	
21		26	26		65-0593086	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			- C. I'll and Control Control	\$8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
23]		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
24	25	25 29 30 30 2. Name and Address of Current Registered Agent			Florida Statutes L Yes L No 10 Name and Address of New Registered Agent		
		rent Registered Agent	8.	1 Name	10, Marie and Address of New Net	hatered Agent	
	LAND, FRED		ľ	Name		•	
	O RIDGEWOOD DRIVE		82	2 Street Add	dress (P.O. Box Number is Not Acceptab	e)	
BOC	CA RATON FL 33434						
			8	3		!	
			84	1 City		85 Zip Code	
11. Pursuant to the provisions of Sactions 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, typed or printed name of registered	agent and little if applicable (NO	TE: Registered A	gent signature requ	uired when reinstatng)	DATE:	
12.	OFFICERS :	AND DIRECTORS	13.	····	ADDITIONS/CHANGES TO OFFIC		
TITLE	D	☐ DELETE	1.1 TITLE			Change Addition	
NAME	Galland, FRD		1.2 NAME				
STREET ADDRESS	3610 BRIDGEWOOD DRIVE		1.3 STREE	E1 ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY	- S1 - ZIP			
TITLE		DELETE	2.1 TITLE			Change Addition	
NAME			2.2 NAM6	:			
STREET ADDRESS			2.3 STRE	ET ADDRESS			
CITY-ST-ZIP			2. 4 City	-ST-ZIP		1	
TITLE		☐ DELETE	3.1 TITLE			Change Addition	
NAME			3.2 NAMI				
STREET ADDRESS			3 3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change Addition	
NAME	i		4 2 NAM	E			
STREET ADORESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY				
TITLE		DELETE	5.1 TITLE			Change Addition	
NAME		_	5.2 NAMI				
STREET ADDRESS				ET ADDRESS			
			5.4 CITY				
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE			Change Addition	
		_ 7	6.2 NAM				
NAME							
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	are and the that the information are	elia Zilli (bia tilian dana nat aus	6.4 CITY		ed in Section 119 07(3)(i) Florida Stalute	s. I further certify that the	

or the exemption stated in Sociion 119.07(3)(i), Florida Statutes. Furner cering that the and accurate and that my signature shall have the same legal effect as if made under oath; that od to execute this report as required by Chapter 607, Florida Statutes; and that my name information indicated on this annual report is am an officer or director of the corpora appears in Block 12 or Block 13 if change