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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 27 1998 8:00am Secretary of State

GLOBA	AL/XCHANGE COMMUNICAT	IONS, INC.			
Principal Plac	e of Business	Mailing Address		A TORNISON NO VETOL DEVIL DRIVE CONTRACTOR	O) DIERO FALLI DIERO BADON INTERNO
8675 NW 53RD STREET 8675 NW 53RD STREET			EET		
SUITE 112 SUITE 112					
MIAMI FL 33	166-4512	MIAMI FL 33166-4512	2	DO NOT WRITE IN T	HIS SPACE
US		US		3. Date Incorporated or Qualified	
2 Principal P	face of Business	2a. Mailing Address		07/06/1995 4. FEI Number	1 1, "
21	INCO OF BUSINESS	26. Walling Address		65-0604742	Applied For
Suite, Apt.	#. etc	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & Stat	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζiρ	Country	Zip	Country	8. This corporation owes or has paid the	e current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registe	red Agent
M/	attesh, frinse				
	75 NW 53RD STREET		82 Street	Address (P.O. Box Number is Not Acceptable)	
	JITE 112		L_1_		
ML	AMI FL 33166		63		
			84 City		B5 Zip Code
					FL 69 Zip Cook
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.					
agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE					
12.	Signature, typied or printed name of registored ages  OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	(NOTE Registered Agent signature	required when reinstating) DA ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICEAS	Z Change Addition
NAME	MATTISH, FRINSE	<b>4.3</b>		MATTECHE COLLET	<b>4</b> 2 0 m g · 7 (0 m m m m m m m m m m m m m m m m m m
STREET ADDRESS 8675 NW 53RD STREET SUITE 112		1.3 STREET ADDRESS	MATTESICH, FRINEE		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	CD	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MATTESICH, R		2.2 NAME		• -
STREET ADDRESS	8675 NW 53RD STREET SUIT	E 112	2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE	VISD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME .	ganatra, anil		3.2 NAME		
STREET ADDRESS	8675 NW 53RD STREET SUIT	E 112	3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY+ST+ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	~ <del></del>		5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
indicated	certify that the information supplied will on this annual report or supplemental	n inis tiling does not edali annual report is trae and	ily for the exemption state accurate and that my sign	d in Section 119.07(3)(i), Florida Statutes. I furth nature shall have the same legal effect as if mad	er certify that the information le under oath; that I am an

powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation or the receiver or trustee Block 12 or Block 13 if changed, or on an attachment with an