SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

ORIGINAL FILING 4/24/96
2ND FILING W/ADD'L INFO. 5/9/96
PD. BY CK(#) 091 TO FL. DEPT. OF STATE 4/24/96 $200.00

DOCUMENT # P95000065548 (6)

1. Corporation Name

~~TRANSPORTEL, INC.~~ N/C 6.3.96
Teledirect, INC.

Principal Place of Business	Mailing Address
33920 U.S. HIGHWAY 19 NORTH SUITE 390 PALM HARBOR FL 34684	33920 U.S. HIGHWAY 19 NORTH SUITE 390 PALM HARBOR FL 34684

5/15 CHANGE OF ADDRESS 101 N. GARDEN ST. CLEARWATER FL. 34615

3. Date Incorporated or Qualified: 08/24/1995
3a. Date of Last Report:

2. Principal Place of Business — 21 / Suite, Apt #, etc 22 / City & State 23 / Zip 24 / Country 25

2a. Mailing Address — 26 / Suite, Apt #, etc 27 / City & State 28 / Zip 29 / Country 30

4. FEI Number: 59-3334705 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NASH, THOMAS C II
400 CLEVELAND STREET
8TH FLOOR
CLEARWATER FL 34615

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

200001898922
-07/19/96--01007--047
***61.25

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

12. OFFICERS AND DIRECTORS / **13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

	12. Officers and Directors	Delete	13. Additions/Changes	Change / Addition
TITLE	PD	☐	SAME	☒ Change
NAME	SIMS, MONTE C			
STREET ADDRESS	33920 U.S. HIGHWAY 19 N., SUITE 390		101 N. GARDEN AVE	
CITY-ST-ZIP	PALM HARBOR FL 34684		CLEARWATER FL 34615	
TITLE	SD	☐		☒ Change
NAME	BROWN, ROBERT G			
STREET ADDRESS	33920 U.S. HIGHWAY 19 N., SUITE 390		"	
CITY-ST-ZIP	PALM HARBOR FL 34684			
TITLE	D	☐		☒ Change
NAME	DAVIS, JACK			
STREET ADDRESS	33920 U.S. HIGHWAY 19 N., SUITE 390		"	
CITY-ST-ZIP	PALM HARBOR FL 34684			
TITLE	D	☐		☒ Change
NAME	KENT, BRADLEY B			
STREET ADDRESS	33920 U.S. HIGHWAY 19 N., SUITE 390		"	
CITY-ST-ZIP	PALM HARBOR FL 34684			
TITLE	D	☐	7-18-96	☒ Change
NAME	HANNA, PHILLIP J			
STREET ADDRESS	33920 U.S. HIGHWAY 19 N., SUITE 390		"	
CITY-ST-ZIP	PALM HARBOR FL 34684			
TITLE	D	☒		☒ Addition
NAME	WIEGMAN, JAMES JOHN		A. ROGER TURRELL	
STREET ADDRESS	33920 U.S. HIGHWAY 19 N., SUITE 390		101 N. GARDEN AVE	
CITY-ST-ZIP	PALM HARBOR FL 34684		CLEARWATER FL 34616	

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 6-5-96 (813) 442-8559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #
T. RIEAS