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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTM OF STATE
Sandra B. M
Secretary o
DIVISION OF COR ATIONS

DOCUMENT # **P95000070306 (2)**

1. Corporation Name

TELECARD COMMUNICATIONS OF FLORIDA, INC.

Principal Place of Business	Mailing Address
10242 NW 47TH STREET SUITE #18 SUNRISE FL 33351 MOVED	10242 NW 47TH STREET SUITE #18 SUNRISE FL 33351 MOVED

2. Principal Place of Business	2a. Mailing Address
21 229 S.W. 31ST STREET	26 229 S.W. 31 ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 -	27 -
City & State	City & State
23 FT. LAUDERDALE	28 FT. LAUDERDALE
Zip / Country	Zip / Country
24 33315 / 25 USA	29 33315 / 30 USA

3. Date Incorporated or Qualified: 09/08/1995

3a. Date of Last Report:

4. FEI Number: 65-0604074 ☐ 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

FARDELLA, JOSEPH D
1711 NW 107TH TERRACE
PLANTATION FL 33322

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

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RADO, PHILIP 2690 S. BEIDGE ROAD COOPER CITY FL 33026	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	CHAIRMAN OF THE BOARD GEORGE R. MCCANLESS 257 Edgewood Road FRANKLIN LAKE, NJ. 07417	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HOLD, DAVID 3900 ISLAND BLVD. MIAMI FL 33160	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	SECRETARY MICHAEL P. OSHATZ 21 COOPER ROAD SCARSDALE, NY 10583	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SULLIVAN, MICHAEL T. 142 HOME STREET VALLEY STREAM NY 11580	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD KIPNIS, BRIAN 18 INWOOD DRIVE MILLTOWN NJ 08850	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	800001765958 -04/02/96--01028--003 ***200.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

4-1-96

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 2/13/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)