

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000087806 (2)

1. Corporation Name

NATIONAL BELL TELECOM, INC.



Principal Place of Business

4500 PGA BLVD. SUITE 104
PALM BEACH GARDENS FL 33418

Mailing Address

4500 PGA BLVD. SUITE 104
PALM BEACH GARDENS FL 33418

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

11/14/1995

3a. Date of Last Report

4. FEI Number

05 062 4567

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

FORD, JOHN J
1017 WOODFIELD CIRCLE
PALM BEACH GARDENS FL 33418

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

Signature of Registered Agent (if different from above) or Director

Signature of Registered Agent (if different from above) or Director

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PRESIDENT
JOHN J. FORD

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
SECRETARY
SUSAN L. FORD

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
TREASURER
SUSAN L. FORD

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP
PRESIDENT
JOHN J. FORD
1017 WOODFIELD CIR
PALM BEACH GARDENS FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP
SECRETARY
SUSAN L. FORD
1017 WOODFIELD CIR
PALM BEACH GARDENS FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP
TREASURER
SUSAN L. FORD
1017 WOODFIELD CIR
PALM BEACH GARDENS FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-95 4076941169
Day Caytime Phone #

CR2E034 (12/95)