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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARIMENT OF STATE

## Sandra B. Mortha

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600000041 (9)

M & J TELECOM SERVICES INC.

## **FILED** Jun 05 1997 8:00am Secretary of State



Filliopal Flace of business	Maling Address	:	ì	
1859 N.W. 100TH DRIVE CORAL SPRINGS FL 33071	1659 N.W. 100TH DRIVE CORAL SPRINGS FL 33071	-5872		
			3. Date Incorporated or Qualified 01/02/1996	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1501 Riverwood LA	.∤. <b>2</b> 6		65-0630	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			Fee Required
city & State  23 Coral Springs, Fl	Cily & State	<b>,</b>	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25 U.S.A.	Zip <b>29</b>	Country 30		Yes No
g. Name and Address of Curren	it Registered Agent		10. Name and Address of New Ro	egistered Agent
DRUCKER, MARC R		81 Name	•	
1659 N.W. 100TH DRIVE		82 Street	Address (P.O. Box Number is Not Accepta	ble)
CORAL SPRINGS FL 33071			1501 Kiverwood	LN.
		83		
		B4 City	<u> </u>	85 Zip Code
		(	Coral Springs	<b>FL</b>   13307)
11. Pursuant to the provisions of Sections 607050 office or registered agent, or both, in the State	rof Florida. Such chance was a	authorized by the cou	d corporation submits this statellitent for the regration's board of directors. Thereby acce	purpose of changing its registered of the appointment as registered
agent. I am familiar with, and accept the obliga	ations of, Section 607.0505, Flo	orida Statutes.	political and a contract of the contract of th	prime despending de regione de
SIGNATURE				
Signature, typed or printed name of registered age  12. OFFICERS ANI			e required when reinstating)	DATE CEDE AND EXPECTODE IN 42
12. OFFICERS ANI	DILLETE	13. 1.1 TUTLE	ADDITIONS/CHANGES TO OFFI	Cens AND DIRECTORS IN 12  Addition
NAME DRUCER, MARK R		1.2 NAME	marc Drucker	D'3 Ouman Hormon
STREET ADDRESS %-1659 N.W.100TH DR		1.3 STREET ADDRESS	امسعني ممناف ا	1-61
DADAL CODINGO EL AGATA-			Coral Springs, 1	1 23077
TITLE	DELETE	14 C/1Y - S1 - Z/P 2 1 TITLE	20121 301116 5 1	Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS	<b>\</b>	
CITY-ST-ZIP		2.4 CHY-S1-ZIP		
TITLE	DELETE	3.1 THLE		Change Addition
NAME		3.2 NAME		-
STREET ADDRESS		3.3 STREET ADDRESS		!
CITY-ST-ZIP		3.4. CITY - ST - ZIP	<b>\</b>	
TITLE	DELFTE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		ļ
STREET ADDRESS		4.3 STREET ADDRESS		ļ
CITY-ST-ZIP		4.4 CITY - \$1 - 71P	<u> </u>	'
TITLE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		!
STREET ADDRESS		5 3 STREET ADDRESS		1
CITY-ST-ZIP		5.4 CITY - \$1 - ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 \$TREE1 ADDRESS		
CITY-ST-ZIP		6.4 CITY - ST - ZIP		
14 I do hereby certify that the information supplier	d with this filing does not qualif		stated in Section 119 07/3)(i). Florida Statute	es. 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 eath; 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: