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

Mailing Address

MIAM! FL 33131

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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C/O 1500 MIAMI CENTER

201 SOUTH BISCAYNE BOULEVARD

PROFIT CORPORATION **ANNUAL REPORT**

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000013493 (7)

Country

g. Name and Address of Current Registered Agent

25

1600 MIAMI CENTER

MIAMI FL 33131

CORPORATION COMPANY OF MIAMI

201 SOUTH BISCAYNE BOULEVARD

TOVTEL, INC.

Principal Place of Business

C/O 1500 MIAMI CENTER

2, Principal Place of Business

Suite, Apt. #, etc.

City & State

MIAMI FL 33131

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Zip

201 SOUTH BISCAYNE BOULEVARD

FILED Feb 13 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/13/1996 Applied For 4. FEI Number 65-0646920 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred **\$5.00** May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees B. This corporation owes or has paid the current year Intangible ☐ No Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable)

Zip Code

(10/97

CR2E034

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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.

Country

81 Name

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84 City

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SIGNATURE Signature, typod or printed name of registered agent and title if application (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change TITLE 1.1 TITLE NAME FRIEDBAUER, ROGER 1.2 NAME STREET ADDRESS 1500 MIAMI CENTER, 201 S. BISCAYNE BLVD. 1.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELFTE 4.1 THILE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TILLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 DITY-ST-ZIP **70000243039^{chaige}** -02/13/98--01032--017 DELETE Addition TITLE 6.1 TrTLE NAME 6.2 NAME STREET ADDRESS **63 STREET ADDRESS** ***150.00 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

1/10/00 (200/279-9104