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Secretary of State
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PROFIT CORPORATION ANNUAL REPORT 2000

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

DOCUMENT # **P96000047334 (3)**

1. Corporation Name
THE GREEK TELEPHONE DIRECTORY, INC.

[redacted]

Principal Place of Business	Mailing Address
4289 NW 63rd Place Boca Raton, FL 33496	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/20/1996

2. Principal Place of Business (21)	2a. Mailing Address (26): P.O. Box 559
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28): Lafayette Hill, PA
Zip (24) / Country (25)	Zip (29): 19444 / Country (30): USA

4. FEI Number: 65-0681779 — 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

STEINBERG, MICHAEL
4289 NW 63rd Place
Boca Raton, FL 33496

10. Name and Address of New Registered Agent

(31) Name
(32) Street Address (P.O. Box Number is Not Acceptable)
(33)
(34) City — FL — (35) Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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] DATE: 4/25/00
(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	STEINBERG, MICHAEL	1.2 NAME	
STREET ADDRESS	4289 NW 63rd Place	1.3 STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33496	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 report or supplemental 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 above or on an attachment with an address.