SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000066461

VISTA TELECOM OF FLORIDA, INC.

FILED Jul 20, 1999 8:00 am Secretary of State

07-20-1999 90021 020 ***550.00



Principal Place	of Business	Mailing Address			i idelidet tra seus still antil antil antil antil antil antil antil antil antil	
1 5 NORTH 5TH STREET 2ND FLOOR 605 W. OLYMPIC BLVD						
SABBLE BROOK NJ-07663					DO NOT WRITE IN THIS SPACE	
LOS ANGELES CA 90015					3. Date Incorporated or Qualified	
					07/24/1996	
Principal Place of Business Za. Mailing Address				h . n	4. FEI Number Applied For	
21 767 NW 374 AUE 25 605 WOLKIND			WHC	תוחם) 65-0691209 Not Applicable	
Suite, Apt. #, etc.			Δ		5. Certificate of Status Desired \$8.75 Additional Fee Required	
27 Suite 50						
City & State City & State LOS ANGE				کیتر	6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip	Country	Zip	Country		This corporation owes the current year	
24 3	312325 USA	29 40015 30	o 215 !	<u>+·</u>	Intangible Personal Property. Yes No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
MINI	TE DENINIC		81	Name		
KINZIE, DENNIS 479 SYCAMORE LANE				82 Street Address (P.O. Box Number is Not Acceptable)		
	NES CITY FL 33844					
MAINES CITT PL 33044			83		·	
			84	City	85 Zip Code	
			[]	•	┣<u>┖</u> │ │	
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						
agent. I a	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 .	Monnie 7	The state of the s			/_/_6/	
	gnature, typed or printed name of registered agent			ent signature	e required when reinstating) DATE DATE DESCRIPTIONS (SUBMISSION OF SUBMISSION OF SU	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	r Kinzie, dennis	DELETE	1.1 TITLE		KINZIE, DENNIG LAddition	
NAME	45 MOOTH STH STREET OND SLOOP		1.2 NAME		479 Syca More LANES 2 01616	
STREET ADDRESS	0.000.000000000000000000000000000000000		1.3 STREET A		HANNES CITY FL 33844	
CITY-ST-ZIP	D D D D D D D D D D D D D D D D D D D		1.4 CITY-ST-Z 2.1 TITLE	JP	Change Addition	
TITLE	PARKER, CLAYTON R	DELETE	2.2 NAME		Change C Addition	
NAME	23920-B DEVILLE WAY		2.3 STREET A	DDDESS		
STREET ADDRESS	MALIBU CA 90265			- 1		
CITY-ST-ZIP	D D		2.4 CITY-ST-Z	3P	Change Addition	
TITLE	MCVICAR, RONALD C	DELETE	3.2 NAME		Change Mount	
NAME	1612 FAIRFORD DR		3.3 STREET A	UDBEss		
STREET ADDRESS	FULLERTON CA 92833		3.4 CITY-ST-2	Y		
CITY-ST-ZIP TITLE	V	DELETE	4.1 TITLE	.n	Change Addition	
NAME	NIGRO, DANIEL F		4.2 NAME		County Cal Medition	
STREET ADDRESS	150 OVERLOOK AVE		4.3 STREET A	DDRESS		
(1	HACKENSACK NJ 07601		4.4 CITY-ST-2			
CITY-ST-ZIP		DELETE	5 1 TITLE		Change Addition	
NAME		DCLLIC	5.2 NAME		V9	
STREET ADDRESS			53 STREET A	DDRESS		
CITY-ST-ZIP			5.4 CITY-ST-2	- 1		
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME		,	
STREET ADDRESS			6.3 STREET A	DDRESS		
CITY-ST-ZIP			6.4 CITY-ST-2			
14 Lhoroby cs	artify that the information supplied with	this filing does not qualify for the	exemption 5	stated in	section 119.07(3)(i), Florida Statutes. I further certify that the information	
14. I hereby cartify 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 on the receiver or trustee employeered 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.						