

**FILED**  
**Jun 02, 2001 8:00 am**  
**Secretary of State**

06-02-2001 90005 034 \*\*\*150.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # P96000075248

1. Entity Name  
PENN BOYS LEGEND TELECOM, INC.

Principal Place of Business  
5617 FUNSTON STREET  
HOLLYWOOD FL 33023

Mailing Address  
P.O. BOX 3661  
WEST HOLLYWOOD FL 33033

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
ZipCountry

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
ZipCountry

4. FEI Number  
59-3406385

Applied For  
Not Applicable

5. Certificate of Status Desired  
\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
GREENFIELD, ALAN E ESQ.  
2600 DOUGLAS ROAD STE 911  
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
CityFLZip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE  
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!  
After MAY 1, 2011  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Delete  
PSD  
SHORTTRIDGE, NORRIS  
5617 FUNSTON STREET  
HOLLYWOOD FL 33023

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Change  
Addition

13. 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 / signature shall have the same legal effect as if made under oath; that I am an officer or director s required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE: [Signature]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER / DIRECTOR  
Date  
Daytime Phone #