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

SIGNATURE:

Apr 30 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000079926 (7) UNIVERSAL ACCESS, INC. Principal Place of Business Mailing Address 1200 AW 57 AVENUE 17418 SW 28 COURT SUITE 208 SUITE 208 MALE FI-89196 MRAMAR FL 33029 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 10500 N.W. 26 Street 65-0695929 10500 N.W. 26 Street Not Applicable \$8.75 Additional 5. Certificate of Status Desired -/0/ Fee Required 101 & State \$5.00 May Be 6. Election Campaign Financing Miami iami Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible USA <u>U5A</u> Personal Property Tax due June 30. X Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent VASQUEZ, VICTOR R -1200 NW 57 AVENUE 82 SUITE 208 MAMI FL 33128 83 11. Pursuant to the p 1508, Florida-Statutes, the above-named corporation submits this statement for the purpose of changing its registered a. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered. Section 607,0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 570 DELETE Change Addition TITLE 1.1 TITLE VASQUEZ VASQUEZ, VICTOR R NAME 1.2 NAME 10500 N.W. 26 Street 1260 NW 67 AVENUE STREET ADDRESS 1.3 STREET ADDRESS MIAMI-FL 33126 33172 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MARKE 1.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETÉ Change ■ Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-2IP Thereby certify that the information of indicated on this annual report of sub-officer or director of the corporation of Block 12 or Block 13 if changed, or or 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 polemental 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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305-**594-11**01