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PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 JUN 26 AM 6:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000082845 (4)

1. Corporation Name

TOUCH TONE TECHNOLOGIES, INC.



Principal Place of Business

1900 GLADES ROAD
SUITE 200
BOCA RATON FL 33431-7260

Mailing Address

1900 GLADES ROAD
SUITE 200
BOCA RATON FL 33431-7333

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
10/08/1996

3a. Date of Last Report

4. FET Number

65-0698442

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes ☐ No

10. Name and Address of New Registered Agent

81

Name

FROST, DEAN

82

Street Address (P.O. Box Number is Not Acceptable)

1900 GLADES ROAD

83

SUITE 200

84

City

BOCA RATON

FL

85

Zip Code

33431

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

June 16, 1997

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☐ DELETE

NAME DR. THEODORE R. LERNER

STREET ADDRESS 7040 LYONS HEAD LANE

CITY-ST-ZIP BOCA RATON, FL 33496

TITLE EXECUTIVE VICE PRESIDENT ☐ DELETE

NAME DEAN FROST

STREET ADDRESS 50 SW 3RD AVENUE

CITY-ST-ZIP BOCA RATON, FL 33432

TITLE EXECUTIVE VICE PRESIDENT ☐ DELETE

NAME J. KENNETH AMICK

STREET ADDRESS 975 NW 49TH WAY

CITY-ST-ZIP COCONUT CREEK, FL 33063

TITLE BOARD OF DIRECTORS ☐ DELETE

NAME BRUCE BRUNSON, DIRECTOR

STREET ADDRESS 17016 BROOKWOOD DRIVE

CITY-ST-ZIP BOCA RATON, FL 33496

TITLE BOARD OF DIRECTORS ☐ DELETE

NAME HAROLD GREENBERG, DIRECTOR

STREET ADDRESS 17595 BOCAIRE PLACE

CITY-ST-ZIP BOCA RATON, FL 33431

TITLE BOARD OF DIRECTORS ☐ DELETE

NAME MICHAEL A. KARMELEN, DIRECTOR

STREET ADDRESS 7 ILANA LANE

CITY-ST-ZIP NEW YORK CITY, NEW YORK 10956

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE BOARD OF DIRECTORS ☐ Change ☐ Addition

1.2 NAME JAMES K. NORMAN, DIRECTOR

1.3 STREET ADDRESS 7908 GLEN NEVIS TERRACE

1.4 CITY-ST-ZIP BOCA RATON, FLORIDA 33496

2.1 TITLE BOARD OF DIRECTORS ☐ Change ☐ Addition

2.2 NAME ROBERT W. MAILLOUX, DIRECTOR

2.3 STREET ADDRESS 9397 RICHMOND CIRCLE

2.4 CITY-ST-ZIP BOCA RATON, FL 33434

3.1 TITLE BOARD OF DIRECTORS ☐ Change ☐ Addition

3.2 NAME ALAN RICHARD WEST

3.3 STREET ADDRESS 6415 NW 30TH AVENUE

3.4 CITY-ST-ZIP BOCA RATON, FL 33496

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

June 16, 1997

CR2E034 (9/96)