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FILED  
Apr 22 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000082845 (4)

1. Corporation Name

TOUCH TONE TECHNOLOGIES, INC.



Principal Place of Business

Mailing Address

1800 GLADES ROAD  
SUITE 200  
BOCA RATON FL 33431-7260

1800 GLADES ROAD  
SUITE 200  
BOCA RATON FL 33431-7260

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/08/1996

4. FEI 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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FROST, DEAN  
1900 GLADES ROAD  
SUITE 200  
BOCA RATON FL 33431

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME P  
LERNER, THEODORE R DR  
STREET ADDRESS 7040 LYONS HEAD LANE  
CITY-ST-ZIP BOCA RATON FL 33496

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME DIRECTOR  
ALAN R. WEST  
1.3 STREET ADDRESS 6415 N.W. 30TH AVE.  
1.4 CITY-ST-ZIP BOCA RATON, FL 33496

TITLE ☐ DELETE

NAME EVP  
FROST, DEAN  
STREET ADDRESS 50 SW 3RD AVENUE  
CITY-ST-ZIP BOCA RATON FL 33432

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME DIRECTOR  
ROBERT W. MAILLOUX  
2.3 STREET ADDRESS 9397 RICHMOND CIRCLE  
2.4 CITY-ST-ZIP BOCA RATON, FL 33434

TITLE ☐ DELETE

NAME EVP  
AMICK, J. KENNETH  
STREET ADDRESS 975 NW 49TH WAY  
CITY-ST-ZIP COCONUT CREEK FL 33063

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME D  
BRUNSON, BRUCE  
STREET ADDRESS 17016 BROOKWOOD DRIVE  
CITY-ST-ZIP BOCA RATON FL 33496

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME D  
GREENBERG, HAROLD  
STREET ADDRESS 17595 BOCAIRE PLACE  
CITY-ST-ZIP BOCA RATON FL 33431

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME D  
KARMELIN, MICHAEL A  
STREET ADDRESS 7 ILANA LANE  
CITY-ST-ZIP NEW YORK CITY NY 10956

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
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 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:

Dean Frost

April 16, 1998

CR2E034 (10/97)