

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000073897

1. Entity Name

NORTH AMERICAN TEL-COM GROUP, INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90004 030 ***150.00

Principal Place of Business

1401 FORUM WAY
SUITE 400
WEST PALM BEACH FL 33401

Mailing Address

1401 FORUM WAY
SUITE 400
WEST PALM BEACH FL 33401-2324

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0776495

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MERCURIO, WILLIAM J
1401 FORUM WAY
SUITE 400
WEST PALM BCH FL 33401

Name

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

City

FL

Zip 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!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	MERCURIO, WILLIAM J	
STREET ADDRESS	12268 CHANNEL DRIVE	
CITY-ST-ZIP	N. PALM BEACH FL 33408	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BERMAN, DOUGLAS	
STREET ADDRESS	1401 FORUM WAY., STE 400	
CITY-ST-ZIP	WEST PALM BCH FL 33401	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MNAYMNEH, SAMI	
STREET ADDRESS	1401 FORUM WAY, STE 400	
CITY-ST-ZIP	WEST PALM BCH FL 33401	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SCHWARTZ, BRIAN D	
STREET ADDRESS	1401 FORUM WAY., STE 400	
CITY-ST-ZIP	WEST PALM BCH FL 33401	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	EBERSOLE, JEFFERY J	
STREET ADDRESS	1401 FORUM WAY., STE 400	
CITY-ST-ZIP	WEST PALM BCH FL 33401	
TITLE	D	<input type="checkbox"/> Delete
NAME	MULLEN, WILLIAM G	
STREET ADDRESS	1401 FORUM WAT., STE 400	
CITY-ST-ZIP	WEST PALM BCH FL 33401	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Froetscher, Robert C.	
STREET ADDRESS	1401 Forum Way, STE 400	
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Stein, Avy H.	
STREET ADDRESS	1401 Forum Way, STE 400	
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Barr, Gregory M.	
STREET ADDRESS	1401 Forum Way, STE 400	
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Vanke, Donald J.	
STREET ADDRESS	1401 Forum Way STE 400	
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Reich, Jack E.	
STREET ADDRESS	1401 Forum Way, STE 400	
CITY-ST-ZIP	West Palm Beach, FL 33401	

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 indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William J. Mercurio 3/30/00 (561) 687-8300

Date

Daytime Phone #

CR2E034 (9/99)