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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State ► DIVISION OF CORPORATIONS

DOCUMENT # P97000098713 (5)

FILED
May 11 1998 8:00am
Secretary of State

	VOICE & DATA, INC		')		
Principal Pla	ace of Business	Mailing Address			18111 1889: (1869 1111 1891
6000 N.W. 28TH WAY		6000 N.W. 28TH WAY			
#04		#G4		DO NOT MIDITE IN THIS SEASE	
FT LAUDERDALE FL 33309		FT LAUDERDALE FL 33309		DO NOT WRITE IN THIS SPACE	
				 Date Incorporated or Qualified 11/19/1997 	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0795152	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & St	ate	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the curre	
24	25	[29]	30		Yes No
	 Name and Address of Curr ILINGS, INC. 	rent Registered Agent	81 Name	10. Name and Address of New Registered A	gent
3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132			83	Ohn Holcomb Address (P.O. Box Number is Not Acceptable) 000 NW 23th Way #G-4	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Status (C.C.)				t. Lauderdale FL	33309
agent. I SIGNATURE	Signature typed or printed name of registered		· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND I	
TITLE	7 0	DFLETE	1.1 TITLE		Change Addition
NAME	HOLCOLM, JOHN		1.2 NAME	Holcomb, John	•
STREET ADDRESS			1.3 STREET ADDRESS	6000 NW 28th Way	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	į	1.4 CITY- \$1 - ZIP		309
TITLE		DELETE	2.1 TITLE		Change Addition
NAME	1		2.2 NAME		
STREET ADDRESS	s		2.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	3 		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		Tal
TITLE		DELETE	4.1 THILE	L	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	3	•	4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 C(TY-ST-Z)P		Change Addition
TITLE			5.1 TITLE	L	Change Addition
NAME	.[5.2 NAME		
STREET ADDRESS) [5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME	L	_ Change _ Receited
STREET ADDRESS			6.3 STREET ADDRESS		
	`				
CITY-ST-ZIP	1		6.4 CITY-ST-ZIP	d in Section 110 07/2/(i) Floride Statutes Justiner part	

14. Thereby 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 suppliernental 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 trusten 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 may altrachment with an address.

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4/14/98

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