

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED  
Feb 27 1998 8:00am  
Secretary of State

DOCUMENT # P97000106511 (3)

1. Corporation Name  
PAY PHONE CONNECTION INC.

Principal Place of Business  
390 WAINAI DR.  
MERRITT ISLAND FL 32953

Mailing Address  
390 WAINAI DR.  
MERRITT ISLAND FL 32953

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/18/1997

4. FEI Number

59-3489194

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

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

9. Name and Address of Current Registered Agent

SEWALL, SCOTT A  
390 WAINAI DR.  
MERRITT ISLAND FL 32953

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

10. Name and Address of New Registered Agent

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, in both, to 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

Scott A Sewall

PRES (not changing signed in error)

2-13-98

(Signature typed or printed name of registered agent and holder of applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PRES  
Scott A. Sewall  
390 Wainai Dr  
Merritt Isl, FL 32953

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 12 NAME ☐ Change ☐ Addition

13 STREET ADDRESS 14 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE 22 NAME ☐ Change ☐ Addition

23 STREET ADDRESS 24 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE 32 NAME ☐ Change ☐ Addition

33 STREET ADDRESS 34 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE 42 NAME ☐ Change ☐ Addition

43 STREET ADDRESS 44 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE 52 NAME ☐ Change ☐ Addition

53 STREET ADDRESS 54 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE 62 NAME ☐ Change ☐ Addition

63 STREET ADDRESS 64 CITY-ST-ZIP ☐ Change ☐ Addition

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 supplementary 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 officer 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 a statement with an address.

SIGNATURE:

Scott A Sewall

PRES

2-13-98

CR2E034 (10/97)