## FILED May 05, 1999 8:00 am Secretary of State 05-05-1999 90008 025 \*\*\*150.00





	0008-025-\$150.00-\$1	50.00		May	05,	, 1999	8:00 am		
	PROFIT					ary of		DOCUMENT - 1	
COF	REPORATION UAL REPORT		FLORIDA ( <b>Ka</b> Si DIVISION OI						
DOCU	MENT # P98	300004	<b>1870</b>			***************************************	si	89600 - 90008 - 15	Q *
· Gurparakio	TONAL PAYPHONE								
US NAI	IONAL PATERIONE 7		ION, INC.						
		B &	- Was Addana	~~~~~					
•	ce of Business AST 9TH STREET		ailing Address 31 SOUTHEAST 9TH S	STREET					
3 #3 APE CORAL FL 33990 CAPE CORAL FL 33990							DO NOT W	RITE IN THIS SPACE	
	, =	-					3. Date Incorporated or Qualife 05/06/1998	ed	
	Place of Business		Mailing Address				4. FEI Number		Applied For
3501 Suite, Apt.	DEL PRADO	BLVO 26	3/01 VEC Suite, Apt. #, etc.	PLAD	0	DLVO		_ \$8.7	Not Applicable  5 Additional
21	1	27	211				5. Certifcate of Status Desired	Fee	Required
City & Stat		FL 28	CHPE_CO	en	, F	L.	6. Election Campaign Financin Trust Fund Contribution	7 11	00 May Be ed to Fees
zip339			<sup>ZIP</sup> 33904	Cou	untry		8. This corporation owes the co	urrent year Intangible	□No
301	9. Name and Address			30	Т		Personal Property Tax.  10. Name and Address of Nev		
ALIE	RILAWYER				81	Name			
	ALMERIA AVENUE				82	Street Addr	ess (P.O. Box Number is Not Acce	ptable)	
COF	RAL GABLES FL 33134				83	·····	······································		
					84	City	***************************************	Fi 85 Z	ip Code
1. Pursuant	to the provisions of Section	ns 607.0502 and 60	07.1508, Florida Stat	utes, the a		•	oration submits this statement for the	FL	•
		ns 607.0502 and 60 the State of Florid the obligations of,	07.1508, Florida Stati la. Such change was Section 607.0505, F	utes, the a authorized lorida Stat		•	oration submits this statement for the board of directors. I hereby acc	FL	•
IGNATURE	Signature, typied or printed name of a	registered agent and title i	l'applicable. (NO	TE: Registered	above-i d by th tutes.	named corporation	5 when reinstating)	the purpose of changing ept the appointment as	its registered registered
IGNATURE 2.	Signature, typed or printed name of o		l'applicable. (NO		above-r d by th tutes.	named corporation		the purpose of changing ept the appointment as	its registered registered
GNATURE 1. LE	Signature, typed or printed name of o OFFI PSTD ENGLER, ULRICH	registered agent and 85e i ICERS AND DIRE	Fapplicable. (NO:	TE: Registered	above-i d by th tules.	named corporation	5 when reinstating)	pe purpose of changing sept the appointment as DATE	its registered registered
IGNATURE 2. LE ME REET ADDRESS	Signature, typed or printed name of r OFFI PSTD ENGLER, ULRICH 1031 SOUTHEAST 9TI	registered agent and little in ICERS AND DIRE	Fapplicable. (NO:	13. 1.1 TI 1.2 No 1.3 SI	above-rd by the tutes.  ITLE  AME  TREET A	named corporation	5 when reinstating)	pe purpose of changing sept the appointment as DATE	its registered registered
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GNATURE  R.  LE  ME  REET ADDRESS  Y- 51- ZIP  LE  ME	Signature, typed or printed name of a OFFI PSTD ENGLER, ULRICH 1031 SOUTHEAST 9TI CAPE CORAL FL 3399	registered agent and little in ICERS AND DIRE	#applicable. (NO CTORS ☐ DELETE	TE: Registered 13. 1.3 TI 1.2 NJ 1.3 SI 1.4 CI 2.1 TI 2.2 NJ	above-rd by the surfers.  ITLE  ITLE  ITREET AL  ITV-ST-2  ITLE  AME	named corporation of the corpora	5 when reinstating)	DATE  Chang	its registered registered TORS IN 12
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