


FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90048 025 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000053729

1. Corporation Name

1 VOICE TELECOMMUNICATIONS, INC.

Principal Place of Business

2977 MCFARLANE RD.
COCONUT GROVE FL 33133

Mailing Address

2977 MCFARLANE RD.
COCONUT GROVE FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/18/1998

4. FEI Number

Applied For

☒ Not Applicable5. 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 the current year intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name **Ricardo J. Martinez**82 Street Address (P.O. Box Number is Not Acceptable)
2977 MCFARLANE Rd.83 **Second Floor**84 City **Coconut Grove** FL 85 Zip Code **33133**

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 *Ricardo J. Martinez*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/30/99
DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETENAME **D CANAL, OMAR B**
STREET ADDRESS **2977 MCFARLANE ROAD**
CITY-ST-ZIP **COCONUT GROVE FL 33133**TITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
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STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition1.2 NAME **BDTERO CANAL, OMAR**
1.3 STREET ADDRESS **2977 MCFARLANE ROAD, 2nd FLOOR**
1.4 CITY-ST-ZIP **COCONUT GROVE, FL 33133**2.1 TITLE **VD** ☐ Change ☒ Addition2.2 NAME **VILLASENOR, EZEQUIEL A**
2.3 STREET ADDRESS **2977 MCFARLANE ROAD, 2nd FLOOR**
2.4 CITY-ST-ZIP **COCONUT GROVE, FL 33133**3.1 TITLE **TSD** ☐ Change ☒ Addition3.2 NAME **MARTINEZ, RICARDO J.**
3.3 STREET ADDRESS **2977 MCFARLANE ROAD, 2nd FLOOR**
3.4 CITY-ST-ZIP **COCONUT GROVE, FL 33133**4.1 TITLE ☐ Change ☐ Addition4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition6.2 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, with all other like empowered.

SIGNATURE:

Ricardo J. Martinez **RICARDO J. MARTINEZ** **3/1/99** **305/872-2926**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/198)