

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED

00 MAY -1 AM 9:15

SECRETARY OF STATE TALLAHASSEE, FLORIDA



DOCUMENT # P98000054248

1. Corporation Name TELECOMS AND HOTELS CORPORATION

Principal Place of Business ONE SOUTHEAST 3RD AVE. SUITE 1210 MIAMI FL 33131

Mailing Address ONE SOUTHEAST 3RD AVE. SUITE 1210 MIAMI FL 33131

REINSTATEMENT

90700

2. Principal Place of Business, 2a. Mailing Address, 3. Date Incorporated or Qualified (06/17/1998), 4. FEI Number, 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 the current year Intangible Personal Property Tax. (No)

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIAGO, MICHEL V ONE SOUTHEAST 3RD AVE, SUITE 1210 MIAMI FL 33131

81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code (FL)

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 (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 4/26/00)

Table with 2 main columns: 12. OFFICERS AND DIRECTORS, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Change/Addition/Delete.

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: MICHEL V. DIAGO (Signature Required) President (305) 755-9966 Date Daytime Phone #

0185379

CR 1E034 (11/98)