

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

04-28-2004 90180 023 ***150.00
P98000056301

DOCUMENT # P98000056301

1. Entity Name

INTELECALL COMMUNICATIONS, INC.



FILED

04 JUL -7 AM 11:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



MOORE CR2E034 (11/03)

Principal Place of Business
11900 BISCAYNE BLVD., STE. 201
MIAMI FL 33181

Mailing Address
11900 BISCAYNE BLVD., STE. 201
MIAMI FL 33181

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0845246

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROSENBERG, ROSS PA
9100 SOUTH DADELAND BOULEVARD
ONE DATCAN CENTER STE. 910
MIAMI FL 33156

Name
INTELECALL COMMUNICATIONS, INC.
Street Address (P.O. Box Number is Not Acceptable)
11900 BISCAYNE BLVD., STE. 201
City **MIAMI** FL Zip Code **33181**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
GOODMAN, SHEVIN
11900 BISCAYNE BLVD. #201
MIAMI FL 33181 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SC SHEVIN GOODMAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-04
Date

305-999-9373
Daytime Phone

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: INTELECALL COMMUNICATIONS
2. The principal office address: 11900 DISCAYNE BLVD, STE. 201
MIAMI, FL 33181
3. The mailing address (if different): _____

4. Date of incorporation/qualification: OCT 1998 Document number: P98000056301

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ROSENBERG, ROSS P.A.
9100 S. DADELAND BLVD., ONE DATACENTR, STE. 910
MIAMI, FL 33156

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SHEVIN GOODMAN
11900 DISCAYNE BLVD, STE 201
(P.O. Box or personal mailbox NOT acceptable)
MIAMI, FL 33181

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

SL
(Signature of an officer or director)

SHEVIN GOODMAN PRESIDENT
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

SL
(Signature of Registered Agent)

5-18-04
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314