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

DOCUMENT # P98000082958

1. Corporation Name

FOX TELECOM, INC.

Principal Place of Business	Mailing Address	
6177 SUN BLVD #401 ST. PETERSBURG FL 33715	6177 SUN BLVD #401 St. Petersburg FL 33715	

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90067 016 ***150.00



Principal Place of Business	Mailing Address				
6177 Sun Blyd #401 St. Petersburg fl 33715	6177 SUN BLVD #401 ST. PETERSBURG FL 33715			DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed 09/18/1998	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number Applied For Not Applicat	-
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired \$8.75 Additional Fee Required	
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	:
Zip Country	Zip 30	Country	/	8. This corporation owes the current year Intangible Personal Property Tax.	
9. Name and Address of Cur	rrent Registered Agent			10. Name and Address of New Registered Agent	
CLADY BLAID W		81	Name	· · · · · · · · · · · · · · · · · · ·	;
CLARK, BLAIR W 300-31ST STREET NORTH,STE.10	1	82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
ST. PETERSBURG FL 33713		83			
		84	City	FL 85 Zip Code	
AA D AA HE WAS TO BE CONTRACTED TO SERVICE TO CONTRACT CONTRACT	0502 and 607 4509 Florida Statuton	the above	o named come	region cultures this statement for the ournose of changing its registere	d T

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.

Stroature, troad or printed name of registered agent and title if applicable (NOTE: Re	costered Agent signature re	required when reinstating) DATE
OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
D DELETE	1.1 TITLE	☐ Change ☐ Additio
SCHEUERER, ROBERT L	1.2 NAME	
6177 SUN BLVD., #401	1.3 STREET ADDRESS	·•
ST. PETERSBURG FL 33715	1.4 CITY-ST-ZIP	
☐ DELETE	2.1 TITLE	☐ Change ☐ Additio
	2.2 NAME	
	2.3 STREET ADDRESS	· ·
	2.4 CITY-ST-ZIP	
☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
	3.2 NAME	
	3.3 STREET ADDRESS	· -
	3.4 CITY-ST-ZIP	
☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
	4. 2 NAME	(m
	4.3 STREET ADDRESS	S 1
	4.4 CITY-ST-ZIP	<u> </u>
☐ DELETE	5.1 TITLE	☐ Change ☐ Additio
	5.2 NAME	
	5.3 STREET ADORESS	
	5.4 CITY-ST-ZIP	
☐ DELETE	6.1 TITLE	☐ Change ☐ Additio
	6.2 NAME	
	6.3 STREET ADDRESS	
	64 CITY-ST-ZIP	
	OFFICERS AND DIRECTORS D SCHEUERER, ROBERT L 6177 SUN BLVD., #401 ST. PETERSBURG FL 33715 DELETE DELETE DELETE	DELETE 1.1 TITLE

indicated on this annual report or supplied with this hirty does not quality for the exemption stated in Section 119.07(3)(j), Fronta 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.

417-0616