

# 2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P99000003715

1. Entity Name:

PhoneCard International, Inc.

FILED

01 OCT 15 AM 9:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1461 Harbour Walk Rd  
Tampa, FL 33602

Same

2. Principal Place of Business

1461 Harbour Walk Rd

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa FL

City & State

Zip

Country

33602

USA

Zip

Country

4. FEI Number

65-0885065

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Gerald Morelli  
1461 Harbour Walk Rd.  
Tampa, FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when withdrawing)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

☐

FILE NOW! FEE IS \$100.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
President  
Gerald Morelli  
1461 Harbour Walk Rd  
Tampa, FL 33602

☐ Delete

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

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☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gerald Morelli

10/09/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Phone #

CR2E034 (11/00)

Gerald Morelli  
Phone Card International, Inc.  
1461 Harbour Walk Rd.  
Tampa, FL 33602

Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Dear Sirs,

I was recently made aware that my corporation was involuntarily dissolved for failure to pay the annual fee. I immediately contacted my accountant who handles all my work. He went through my checks and showed me we had sent you a check on April 4th of 2001. We have never received any notices from your office and that is why I was unaware that this took place. I contacted your office today and explained what transpired and was told to download the accompanying form, fill it out, sign it and mail it to your office with a replacement check of \$158.75. Thank you for your help. If you have any questions you can contact me at (813) 453-3095 or my accountant Mark Knauf, CPA at (941) 474-5450.

Sincerely,



Gerald Morelli  
President