2001 UNIFORM BUSINESS REPORT (UBR) FILED Sep 12, 2001 08:00 AM P99000022893 DOCUMENT # 1. Entity Name **Secretary of State** TROPICAL TELECOMMUNICATIONS, INC. Principal Place of Business Mailing Address 18187 JUPITER LANDINGS DRIVE 18187 JUPITER LANDINGS DRIVE JUDITER FL FL 33458 33458 2. Principal Place of Business 3. Mailing Address 5447 CENTER STREET 5447 CENTER STREET Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For JUPITER FL JUDITER 65-0926058 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33458 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent POSNER MICHAEL JESQ. 4420 BEACON CIRCLE, SUITE 100 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL33407 US City 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 09/12/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE X Addition ☐ Change MAME NAME **PHILLIPS** TERESA STREET ADDRESS STREET ADDRESS 5447 CENTER STREET CITY-ST-ZIP CITY-ST-ZIP JUPITER ☐ Delete TITLE ☐ Change NAME DUPILKA GREG NAME STREET ADDRESS 5447 CENTER ST. STREET ADDRESS CITY-ST-ZIP JUDITER FL 33458 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Сhапде TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

09/12/2001

Daytime Phone #

Date

Teresa K Phillips

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _

CR2E034 (11/00)

TERESA K PHILLIPS, TREASURER 5447 CENTER ST

JUPITER, FL 33458

TERESA K PHILLIPS, TREASURER 5447 CENTER ST