2001 UNIFORM BUSINESS REPORT (UBR)

May 10, 2001 8:00 am Secretary of State DOCUMENT # P9900037002 1. Entity Name TELEGATE, INC. 05-10-2001 90209 028 ***150.00 Principal Place of Business Mailing Address 100 S BISCAYNE BLVD. 100 S BISCAYNE BLVD. **SUITE 1100 SUITE 1100** MIAMI FL 33131 **MIAMI FL 33131** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0924911 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Jerome Hollo ROSENTHAL, KERRY E Street Address (P.O. Box Number is Not Acceptable), 100 S. Biscayne Blvd., #1100 2875 NE 191 STREET SUITE 500 **AVENTURA FL 33180** City Miami ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity SIGNATURE Signature, typed agent and title if applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change Addition TITLE Delete TITLE NAME HOLLO, TIBOR NAME STREET ADDRESS STREET ADDRESS 100 S BISCAYNE BLVD. STE 1100 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 ☐ Change Addition ☐ Delete TITLE TITLE HOLLO, WAYNE NAME STREET ADDRESS STREET ADDRESS 100 S BISCAYNE BLVD. STE 1100 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33131** ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME HOLLO, JEROME S NAME STREET ADDRESS STREET ADDRESS 100 S BISCAYNE BLVD. STE 1100 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE ☐ Delete TITLE NAME 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

TIBOR HOLLO

4/18/01 3*05/*358-77**/**0