

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2002 8:00 am
Secretary of State

01-21-2002 90046 034 ***150.00

DOCUMENT # P99000055439

1. Entity Name
LD TELECOMMUNICATIONS, INC.

Principal Place of Business

444 BRICKELL AVE
SUITE P-60
MIAMI FL 33131

Mailing Address

444 BRICKELL AVE
SUITE P-60
MIAMI FL 33131

2. Principal Place of Business

444 BRICKELL AVENUE

3. Mailing Address

444 BRICKELL AVENUE

Suite, Apt. #, etc.

STE P60

Suite, Apt. #, etc.

SUITE P60

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33131

Country

USA

Zip

33131

Country

USA

4. FEI Number

65-0931655

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

LAHRSEN, CARLOS F
600 BRICKELL AVE
207A
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name **CARLOS LAHRSEN**
Street Address (P.O. Box Number is Not Acceptable) **444 BRICKELL AVENUE**
SUITE P60
City **MIAMI** **FL** **Zip Code** **33131**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

01-10-02

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 \$150.00
After May 1, 2002 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

TITLE	PD	☐ Delete
NAME	LAHRSEN, CARLOS F	
STREET ADDRESS	600 BRICKELL AVE	
CITY-ST-ZIP	MIAMI FL 33131	
TITLE	D	☐ Delete
NAME	LAHRSEN, FELIPE J	
STREET ADDRESS	600 BRICKELL AVE	
CITY-ST-ZIP	MIAMI FL 33131	
TITLE	D	☐ Delete
NAME	CANTO, JUAN C	
STREET ADDRESS	600 BRICKELL AVENUE	
CITY-ST-ZIP	MIAMI FL 33131	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	☒ Change ☐ Addition
NAME	LAHRSEN, CARLOS F.	
STREET ADDRESS	444 BRICKELL AVENUE STE P60	
CITY-ST-ZIP	MIAMI - FL - 33131	
TITLE	D	☒ Change ☐ Addition
NAME	LAHRSEN, FELIPE J	
STREET ADDRESS	444 BRICKELL AVENUE STE P60	
CITY-ST-ZIP	MIAMI - FL - 33131	
TITLE	D	☒ Change ☐ Addition
NAME	CANTO, JUAN C.	
STREET ADDRESS	444 BRICKELL AVENUE STE P60	
CITY-ST-ZIP	MIAMI - FL - 33131	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01-10-02 3053588952

CR2E034 (9/01)