2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State
02-21-2002 90104 044 ***150.00

DOCUMENT # P99000061143

1. Entity Name
PRIME COMMUNICATIONS, INC.

Principal Place of Business	Mailing Address
2563 GARDEN CT COOPER CITY FL 33026	2563 GARDEN CT COOPER CITY FL 33026

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
17220 NW 2ND CT	17220 NW 2ND CT
Suite, Apt. #, etc.: MIAMI FL	Suite, Apt. #, etc.:
City & State:	City & State: MIAMI FL
Zip: 33169 Country: USA	Zip: 33169 Country: USA

4. FEI Number 65-0936228 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SIEGEL, LISA B
2563 GARDEN CT
COOPER CITY FL 33026

7. Name and Address of New Registered Agent

Name: JOE RICH
Street Address (P.O. Box Number is Not Acceptable): 17220 NW 2ND CT.
City: MIAMI FL Zip Code: 33169

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: Joe Rich, Director, Joe Rich 2/5/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 $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	D	☒ Delete
NAME	TAGGI, KATHRYN E	
STREET ADDRESS	2563 GARDEN CT	
CITY-ST-ZIP	COOPER CITY FL 33026	
TITLE	PD	☐ Delete
NAME	JOE RICH	
STREET ADDRESS	17220 NW 2ND CT.	
CITY-ST-ZIP	MIAMI FL 33169	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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NAME		
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CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

CR2E034 (9/01)

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: Joe Rich, Joe Rich, Director 2/5/02 305 249 5590
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #