FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLOR:DA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOO! WENT	
DOCUMENT	#
1. Corporation Name	

Principal Place of Business

47 EAST ROBINSON ST.

S19216

(8)

RTI TELECOM, INC.

Mailing Address	
47 EAST ROBINSON ST. SUITE 200 ORLANDO FL 32901	

	ORLANDO FL 32801 US			ORLANDO FL 32901 US	I			3	Date Incorporated or Qualified 12/14/1990	3a . Da		st Report 1/1995	-
2.	Principal Place of Busin	ness	2a.	Mailing Address				4	. FEI Number			Applied For	_
21			26						59-3069842			Not Applicable	
22	Suite, Apt. #, etc.		27	Suite, Apt. #, etc.				5	. Certificate of Status Desired	×		.75 Additional ee Required	
23	City & State		28	Oity & State				6	. Election Campaign Financing Trust Fund Contribution			.00 May Be dded to Fees	_
24	Zip	Country 25	29	Zφ	30	untry		8	. This corporation has liability for Florida Statutes	intangible s 🔲 No	tax unde	er s. 199.032,	
	g. Nam	e and Address of Cu	rrent Regis	tered Agent		I		10	Name and Address of New	Registere	d Agent		_
						81	Name						
	RUSSELL, RICH 866 NOTTINGHA					82	Street Addr	ess (F	2.0. Box Number is Not Accepta	ble)			
	ORLANDO FL 3					83							office
						84	City			F	L 85	Zip Code	
11	or registered agent, of	sions of Sections 607. or both, in the State of ept the obligations of,	Florida Sud	u change was authori	ized by the	ove-r	amed corpor oration's boar	ation rd of d	submits this statement for the pi directors. Thereby accept the ap	urpose of c pointment	changing as registe	its registered office ered agent. I am	е
SI	IGNATURE	diging material page to see	Lagorian The d	aggal Johan 199	aoin asagaidh	 د نها ان	Signal in reduces	dwter	eventing	DATE			
1			S AND DIREC		13).		,	ADDITIONS/CHANGES TO OF	FICERS A	ND DIRE	CTORS IN 12	

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD] DELETE	* 1 THEE	Cnange Addition
NAME	RUSSELL, RICHARD		1.2 NAME	
STREET ADDRESS	47 E. ROBINSON ST., SUITE 200		1.3 STREET ADDRESS	
CHTY-ST-ZIP	ORLANDO FL		14 Oith - S1 - ZiP	
TITLE] DELETE	2 1 TITLE	Change Addit-on
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY - ST - ZIP			2 4 City - ST ZiP	
TITLE		DELETE	3 1 11ftE	Crange Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY - ST - ZIP			3.4 C(FY - ST - Z(P)	
TITLE) DELETE	4. 1 1111£	Change Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STHEET ADDRESS	
CHTY-ST-ZIP			4.4 City - St - ZiP	
TiTLE		DELETE	5 1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.9 STREET ADDRESS	
CHTY - ST - ZIP			5.4 CH Y - ST - ZIP	
TITLE		DELFTE	6 1 TIFLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6 3 STREET ADDRESS	
CITY - S1 - ZIP			64 CITY ST-ZIF	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)tik). Florida Statutes I further certify that the information indicated on this annual report or supplemental annual report is true and ancurate 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 12 or Block 13 it glyinged, or on an attractment with an address.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 426-6868

CR2E034 (12/95)