FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

29

9. Name and Address of Current Registered Agent

24

25

BRADLEY, CURTIS

MIAMI FL 33189

SIGNATURE:

9084 S.W 215 TERR.

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS POCUMENT # S33032 (1)MIAMI TELEPHONE, INC. Principal Place of Business Mailing Address 18495 S. DIXIE HWY. 18495 S. DIXIE HWY. DO NOT WRITE IN THIS SPACE MIAMI FL 33157 MIAMI FL 33157 US 3. Date Incorporated or Qualified 02/20/1991 2. Principal Place of Business 28. Mailing Address 21 65-0246669 Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired 22 City & State City & State 6. Election Campaign Financing 23 Trust Fund Contribution Country Zφ Country Žιρ 8. This corporation owes or has paid the current year Intangible

FILED Apr 28 1998 8:00am Secretary of State



4-20-98 3050382WA

Personal Property Tax due June 30.

Street Address (P.O. Box Number is Not Acceptable)

10. Name and Address of New Registered Agent

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

Not Applicable

			84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	- 110 -11.0	☐ Change ☐ Addition
NAME	BRADLEY, CURTIS		1.2 NAME		
STREET ADDRESS	9084 S.W. 215 TERR.		1.3 STREET	ADDRES	s
CITY-ST-ZIP	MIAMI FL 33189		1.4 CITY - S	T-ZIP	
TITLE		DELETE	2.1 TITLE		Change
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET	ADDRES	ا د
CITY-ST-ZIP			2 4 CiTY-S	T-ZIP	
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET	ADORES:	3
CITY-ST-ZIP			3.4 CITY-S	T-ZIP	
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET	ADDRES	ş
CITY-ST-ZIP			4.4 CITY-S	T-ZiP	
TITLE		☐ DELETE	5.1 TATLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET	ADDRES:	s
CITY-ST-7IP			5 4 CITY - ST	T-ZIP	
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET	ADDRES:	;
CITY-ST-Z#P			6.4 CITY-S		
14. 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 annual report or suppliemental entire trustee 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 disposed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attat hment with an address.					

30

Name

82