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**PROFIT CORPORATION** ANNUAL REPORT

1999

DOCUMENT # \$33032



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90131 006 \*\*\*150.00

MIAMI T	ELEPHONE, INC.				•				
Principal Plac	e of Business	Mailing Address						#1#11 #1#11 #1#11	#1#11 #1#11 F##1
18495 S. DIXIE		18495 S. DIXIE HWY.							
#371 MIAMI FL 3315		#371 MIAMI FL 33157				DO NOT WRI	TE IN THIS	SPACE	
US	,,	US			3. Date	ncorporated or Qualifed			_ <del>-</del>
						0/1991			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI N			A	pplied For
21		26			65-0	246669		N	of Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		<u> </u>	5. Certif	cate of Status Desired			Additional e juired
City & Sitat		City & State			6 Floor	on Campaign Financing			May Be
23		28			1	Fund Contribution		•	tiiFees
Zip	Country	Zip	Countr			orporation owes the cur	ent vear In		<u>-</u>
24	25	29	30	•	ì	mal Property Tax.	om your m	Yes	□No
	9. Name and Address of Currer	<del></del>	_ <del></del>			and Address of New	Registered	Agent	
			81	Name					
	DLEY, CURTIS		82	Street A.44	trace (P A D	.c Number is Not Accept	ahle)		
	4 S.W 215 TERR.		62	Sueet Acid	ness (r.∪. D(	a Mariner is Not Accept	able)		
MIA	MI FL 33189		83	3					
				4 00				0.7:-	Code
			84	4 City			FL	85 Zip	Code
SIGNATURE	Signature, typed or printed n. me of registered age	and title if applicable. (NOT)	E: Registered Age	ent signature require		ONS/CHANGES TO OF	DATE FICERS A	VD DIRECTO	ORS IN 12
TITLE	I P	DELETE	1.1 TITLE		רוסטה	7 3118/31/11/1020 10 01	1.00.10		
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CTDEET ADDDCCC	BRADLEY, CURTIS 9084 S.W. 215 TERR.	i orien	1.2 NAME					Change	☐ Addition
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14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.0'(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is tiple 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 12 or Block 13 if changed, or on an attachment with an address; with all other like empowered.

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

41 22-5 305 2318 2240
Date 5 Daytime Phone #