FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
1995 MAY -1 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S94603 (5)

1. Corporation Name
UNITED TELEMEDIA, INC.

Principal Place of Business
~~1110 BRICKELL AVENUE~~
~~SUITE 601~~
~~MIAMI FL 33131~~

Mailing Address
~~1110 BRICKELL AVENUE~~
~~SUITE 601~~
~~MIAMI FL 33131~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/18/1991
3a. Date of Last Report: 06/15/1994

2. Principal Place of Business	21 6065 NW 167 ST
Suite, Apt. #, etc.	22 # B-14
City & State	23 MIAMI, FL.
Zip	24 33015
Country	25 USA
2a. Mailing Address	26 6065 NW 167 ST
Suite, Apt. #, etc.	27 B-14
City & State	28 MIAMI FL.
Zip	29 33015
Country	30 USA

4. FEI Number 65-0401023 ~~NOT APPLICABLE~~ — Applied For / Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

LEGAL ASSETS, INC.
1110 BRICKELL AVENUE
PENTHOUSE
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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 ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PS	1 1 TITLE	PRESIDENT ☑ Change ☐ Addition
NAME	KYLE, JOHN II	1 2 NAME	JOHN N. KYLE II
STREET ADDRESS	1110 ~~BRICKELL AVENUE, SUITE 601~~	1 3 STREET ADDRESS	6065 NW 167 ST
CITY ST ZIP	~~MIAMI FL~~	1 4 CITY-ST-ZIP	MIAMI, FL. 33015
TITLE		2 1 TITLE	☐ Change ☐ Addition
NAME		2 2 NAME	800001490668 -05/17/95--01046--020 ****225.00 ****225.00
STREET ADDRESS		2 3 STREET ADDRESS	
CITY ST ZIP		2 4 CITY-ST-ZIP	
TITLE		3 1 TITLE	☐ Change ☐ Addition
NAME		3 2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	
CITY ST ZIP		3 4 CITY-ST-ZIP	
TITLE		4 1 TITLE	☐ Change ☐ Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY ST ZIP		4 4 CITY-ST-ZIP	
TITLE		5 1 TITLE	☐ Change ☐ Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY ST ZIP		5 4 CITY-ST-ZIP	
TITLE		6 1 TITLE	JRW ☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	5-1-95
CITY ST ZIP		6 4 CITY-ST-ZIP	

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)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ______________________ 5/8/95 305-362-0523
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0130246 CP