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Feb 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V08392

(5)

1. Corporation Name

SOUTH FLORIDA TELEPHONE, INC.



Principal Place of Business

2825 S.W. 22 AVENUE
SUITE 102
DELRAY BEACH FL 33445
US

Mailing Address

1561 S. CONGRESS AVENUE
SUITE 211
DELRAY BEACH FL 33445-6397
US

3. Date Incorporated or Qualified

01/22/1992

3a. Date of Last Report

04/18/1996

2. Principal Place of Business

21 7634 N.W. 6 Ave

Suite, Apt. #, etc.

22

City & State

23 Boca Raton, FL

Zip

24 33487

Country

25 Palm Bch

2a. Mailing Address

26 7634 N.W. 6 Ave

Suite, Apt. #, etc.

27

City & State

28 Boca Raton, FL

Zip

29 33487

Country

30 Palm Bch

4. FEI Number

65-0312556

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

BASQUILL, MICHAEL
2825 SW 22ND AVE.
STE. 102
DELRAY BEACH FL 33445

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME BASQUILL, MICHAEL
STREET ADDRESS 2825 SW 22 AVE., #102
CITY-ST-ZIP DELRAY BEACH FL

TITLE T ☐ DELETE

NAME FRANCIS BASQUILL
STREET ADDRESS 32 CARLSON RD.
CITY-ST-ZIP WEST HAVEN CT

TITLE P ☐ DELETE

NAME MICHAEL BASQUILL
STREET ADDRESS 2825 SW 22 AVE 102
CITY-ST-ZIP DELRAY BCH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/97 1561 958982

CR2E034 (9/96)