

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 08:00 AM
Secretary of State

DOCUMENT # V30687

1. Entity Name
THE FONE CONNECTION OF TAMPA BAY, INC.



Principal Place of Business
2708 AZEELE
TAMPA, FL 33609

Mailing Address
2708 AZEELE
TAMPA, FL 33609



03252008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3115851

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

GOLDSTEIN, BRUCE S.
220 EAST MADISON ST.
SUITE 724
TAMPA, FL 33602

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Bruce Goldstein
Signature, typed or printed name of registered agent and title if applicable

Bruce Goldstein
(NOTE: Registered Agent signature required when reinstating)

4-7-08
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

000000387751
04/21/08-80032-023 150.00

10. OFFICERS AND DIRECTORS

TITLE P
NAME MEZRAH, JACK MD
STREET ADDRESS 5007 SAN MIGUEL
CITY-ST-ZIP TAMPA, FL

TITLE V
NAME MEZRAH, ALLAN
STREET ADDRESS 5007 SAN MIGUEL
CITY-ST-ZIP TAMPA, FL

TITLE ST
NAME MEZRAH, MIKE
STREET ADDRESS 615 SO GLEN
CITY-ST-ZIP TAMPA, FL

TITLE T
NAME MEZRAH, BRIAN
STREET ADDRESS 81 DAVIS BLVD
CITY-ST-ZIP TAMPA, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

allan mezrah

4-7-08

8132548386