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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

NAME

STREET ADDRESS CITY-ST-ZIP

INTERNATIONAL TELEPHONE EQUIPMENT, INC.

Principal Place of Business Mailing Address				1 1000 411000 1110 1100 1210 5210 5210 5100 5100	
12150 RACE TRACK ROAD TAMPA FL 33636 US		12150 RACE TRACK ROAD TAMPA FL 33636 US		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				05/01/1992	
	lace of Business	2a. Mailing Address			oplied For
Suite, Apt.	# alo	26 Suite, Apt. #, etc.			lot Applicable
22	<u></u>	27		LE L'Additionate of Statue Degrad	Additional Required
City & State	e	City & State			May Be I to Fees
Zip	p Country Zip		Country	8. This corporation owes or has paid the current year Ir	ntangible
24	25	29	30	Personal Property Tax due June 30. Yes	□ No
	g. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent	
DIN	IARCO, ROBERT F.		81 Name		
3440 EAST-LAKE ROAD #TD4			82 Street Addr	ress /R O. Box Number is Not Acceptable.	
PALM HARBOR FL 34685				ress (R.O. Box Number is Not Agreptable) 4/2	
			83		
			84 City	El 85 Zip	Code
44 Pursuant	to the provisions of Sections 607 050	12 and 607 1508 Florida Statute	es the above-named corr	poration submits this statement for the purpose of changing	its registered
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 regist 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					s registered
SIGNATURE	Signature, typed or printed name of registered ag	ont and title if applicable (NOT)	E: Registered Agent signature requir	red when reinstating) DATE	
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 12
TITLE	Ď	DELETE	1.1 TITLE	☐ Change	Addition
NAME	ALBISON, TOM	/	1.2 NAME		
STREET ADDRESS	12150 RACE TRACT RD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE	☐ Change	Addition
NAME	ALBISON, STELLA		2.2 NAME		
STREET ADDRESS	12150 RACE TRACT RD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		2. 4 CITY-ST-ZIP		
TITLE		☐ DELE te	3.1 TITLE	Change	Addition
NÀME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELE TE	4.1 TITLE	☐ Change	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE	Change	Addition
NAME			5.2 NAME	·	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY+ST-ZIP	1	
TITLE		DELETE	6 4 TITLE	Change	Addition

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 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.

6.2 NAME 6.3 STREET ADDRESS

FILED

Feb 18 1998 8:00am

Secretary of State

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