File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris ANNUAL REPORT Secretary of State 1999 99 APR 22 PM 2: 14 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company DOCUMENT # Z00176 1a. Principal Place of Business Address INTELOK NORTH AMERICA, L.C. 1648 DONNA ROAD 1648 DONNA ROAD WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 01/23/1990 FLSuite. Apt. #. etc. Suite Apt # etc. 4. FEI Number Applied For City & State City & State 65-0178127 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Zip Country \$8.75 Additional Fee Required 03/02/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office BERENBAU, EDUARDO 1648 DONNA ROAD Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33409 Suite Apt #, etc. City Zin Code 9. Pursuant to the provisions of Sections 608.416 and 608 508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations SIGNATURE . (Bugistered Agest Accepting Appliedment) (RDIL Begistered Agest signature in princip when removed by 10. Title Managing Members/Managers **Business Street Address** City State and Zin Code М INTEROTEL B.V, WIJNHAVEN 3-3011WG ROTTERDAM, NETHERLAND INTELOK INTERNATIONA, М WIJNHAVEN 3,3011WG ROTTERDAM, NETHERLAND 600002857356---(-04/29/99--0112--013 ****188.75 ****188.75

11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trusted empowered to execute this report as required by Chapter 608. Florida Statutes; and that my name appears in Block 10, or on an

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attachment with an address.

SIGNATURE: