

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90053 037 ***150.00

DOCUMENT # L52096

1. Entity Name

TELECOM RESELLER, INC.

Principal Place of Business

Mailing Address

% CHARLOTTE KLUGE
 600 THREE ISLANDS BLVD. #1815
 HALLANDALE FL 33009
 US

% CHARLOTTE KLUGE
 600 THREE ISLANDS BLVD. #1815
 HALLANDALE FL 33009-7802
 US

00023004



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5501 NW 50th Way

Suite, Apt. #, etc.

3. Mailing Address

5501 NW 50th Way

Suite, Apt. #, etc.

City & State

Coconut Creek, FL

City & State

Coconut Creek, FL

4. FEI Number

65-0188734

Applied For

Not Applicable

Zip

33073

Country

USA

Zip

33073

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KLUGE, CHARLOTTE
 600 THREE ISLANDS BLVD. #1815
 HALLANDALE FL 33009

7. Name and Address of New Registered Agent

Name

Barrie R. Hitchcock

Street Address (P.O. Box Number is Not Acceptable)

5501 NW 50th Way

City

Coconut Creek

FL

Zip Code

33073

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.

SIGNATURE *Barrie R. Hitchcock* **BARRIE R. HITCHCOCK**

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

(NOTE: Registered Agent signature required when reinstating)

2/11/00
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE Delete
 NAME DP
 STREET ADDRESS KLUGE, CHARLOTTE
 CITY-ST-ZIP 600 THREE ISLANDS BLVD. #1815 HALLANDALE FL 33009

TITLE Delete
 NAME S
 STREET ADDRESS KLUGE, KENNETH
 CITY-ST-ZIP 600 THREE ISLANDS BLVD. #1815 HALLANDALE FL 33009

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Change Addition
 NAME
 STREET ADDRESS 5501 NW 50th Way
 CITY-ST-ZIP Coconut Creek, FL 33073

TITLE Change Addition
 NAME
 STREET ADDRESS 5501 NW 50th Way
 CITY-ST-ZIP Coconut Creek, FL 33073

TITLE Change Addition
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 STREET ADDRESS
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Charlotte Kluge* **Charlotte Kluge**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/2000
 DATE

Daytime Phone #