

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 12, 1999 8:00 am
Secretary of State

07-12-1999 90008 033 ***550.00

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PROFIT CORPORATION
 ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

1999

DOCUMENT # **P97000087391**

1. Corporation Name
FLATEL, INC.



Principal Place of Business
 1705 W. 45TH ST.
 WEST PALM BEACH FL 33407
 US

Mailing Address
 1705 W. 45TH ST.
 WEST PALM BEACH FL 33407
 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
1. 2128 Okeechobee Blvd		2. 2128 Okeechobee Blvd		10/09/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
3. W. Palm Beach FL		4. W. Palm Beach FL		65-0788827	
City & State		City & State		Applied For	
5. 33409		6. 33409		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
Country		Country		<input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> \$5.00 May Be Added to Fees	
25. USA		29. 33409		30. USA	
26. USA		30. USA		8. This corporation owes the current year Intangible Personal Property.	
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES INC.
 4521 PGA BOULEVARD #211
 PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

I, 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.

GNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 'N 12	
E	PSTD NODARSE, OSCAR 1705 W. 45TH ST. WEST PALM BEACH FL 33407	<input checked="" type="checkbox"/> DELETE	1.1 TITLE President 1.2 NAME Adriana Solar 1.3 STREET ADDRESS 2128 Okeechobee Blvd 1.4 CITY-ST-ZIP W. Palm Beach FL 33409
E	VD SOLAR, ADRIANA 1705 W. 45TH ST. WEST PALM BEACH FL 33407	<input type="checkbox"/> DELETE	2.1 TITLE Vice president 2.2 NAME Victor Solar 2.3 STREET ADDRESS 2128 Okeechobee Blvd 2.4 CITY-ST-ZIP WPB FL 33409
E		<input type="checkbox"/> DELETE	3.1 TITLE Secretary 3.2 NAME Adriana Solar 3.3 STREET ADDRESS 1708 Richard Ln 3.4 CITY-ST-ZIP WPalm Bch FL 33406
E		<input type="checkbox"/> DELETE	4.1 TITLE Vice president 4.2 NAME Abido Matarri 4.3 STREET ADDRESS 2128 Okeechobee Blvd 4.4 CITY-ST-ZIP WPB FL 33409
E		<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
E		<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 dictated 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 10-30-99 DAYTIME PHONE #: 561-688-2525

CR2E034 (5/99)