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95 MAY -1 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Muscatelli
Secretary of State
Office of Corporations

DOCUMENT # **P92000002801 (8)**

T. Corporation Name

KUBATEL, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

2823 SE 22ND PL
CAPE CORAL FL 33904

2823 SE 22ND PL
CAPE CORAL FL 33904

3. Date for preparation of financials 11/02/1992	3a. Date of Last Report 05/01/1994
4. FBI Number 65-0375171	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
State Apt # etc. 22	State Apt # etc. 27
City & State 23	City & State 28
Country 24	Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KUBETSCHEK, SANDRA L
2823 SE 22ND PL
CAPE CORAL FL 33904**

B1 Name	B5 Zip Code
B2 Street Address (P.O. Box Number is Not Acceptable)	FL
B3	
B4 City	

11. Pursuant to the provisions of Sections 607.0501 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 this corporation's Board of Directors. I hereby accept the appointment as registered agent. I am aware of the provisions of Sections 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

City

12. OFFICERS AND DIRECTORS	
12-1 NAME 12-2 STREET ADDRESS 12-3 CITY & STATE	DP KUBETSCHEK, PETER G 311 PALERMO CIR FT MYERS BEACH FL 33931
12-1 NAME 12-2 STREET ADDRESS 12-3 CITY & STATE	DV WACHTEL, SIEGFRIED 2823 SE 22ND PL CAPE CORAL FL 33904
12-1 NAME 12-2 STREET ADDRESS 12-3 CITY & STATE	DST KUBETSCHEK, SANDRA L 2823 SE 22ND PL CAPE CORAL FL 33904
12-1 NAME 12-2 STREET ADDRESS 12-3 CITY & STATE	
12-1 NAME 12-2 STREET ADDRESS 12-3 CITY & STATE	
12-1 NAME 12-2 STREET ADDRESS 12-3 CITY & STATE	
12-1 NAME 12-2 STREET ADDRESS 12-3 CITY & STATE	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
13-1 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-2 STREET ADDRESS	
13-3 CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-4 NAME	
13-5 STREET ADDRESS	
13-6 CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-7 NAME	
13-8 STREET ADDRESS	
13-9 CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-10 NAME	
13-11 STREET ADDRESS	
13-12 CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-13 NAME	
13-14 STREET ADDRESS	
13-15 CITY & STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily introduced and does not qualify for the exemption stated in Section 119.041(5), Florida Statutes. I hereby warrant 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. I am an officer or director of the corporation or the manager or trustee in possession of the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or as an attachment with an address.

SIGNATURE: *Sandra Kubetschek*
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

4-29-95 8135428949