## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## **FILED** Apr 14, 2005 08:00 AM Secretary of State DOCUMENT # P03000039209 1. Entity Name MTEL TELECOMMUNICATIONS INC. Principal Place of Business Mailing Address 1050 NW 163 DRIVE 1050 NW 163 DRIVE MIAMI, FL 33169 US MIAMI, FL 33169 US 04052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 54-2106365 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \_\_\_\_ Fee Required 6. Name and Address of Current Registered Agent VAZQUEZ, MIGUEL A SR. DO NOT WRITE 1050 NW 163 DRIVE ... MIAMI, FL 33169 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. DITLE VAZQUEZ, MIGUEL A SR NAME STREET ADDRESS 1050 NW 163 DRIVE MIAMI, FL 33169 CITY-ST-ZIP 1000000304495 04714705-80046-001 tsu.wr-TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. 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 of applemental 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 report or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attactive in all address, with all other like empowered.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR