

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F58286

Entity Name: COMTEL, INC.**Current Principal Place of Business:**C/O DOLORES SUKHDEO
14901 NE 20TH AVENUE
MIAMI, FL 33181-1121**Current Mailing Address:**C/O DOLORES SUKHDEO
14901 NE 20TH AVENUE
MIAMI, FL 33181-1121 US**FEI Number:** 59-2142968**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SUKHDEO, DOLORES
14901 NE 20TH AVE
MIAMI, FL 33181-1121 US*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:** DOLORES SUKHDEO

03/14/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name SUKHDEO, DOLORES
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181

Title SECRETARY
Name SOCIAS, PEGGY
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181

Title CAO
Name OLMO, PAMELA
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name SILVERS, LAURIE
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name BATMASIAN, MARTA T
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name CHIN, CAROLYN
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name BRATHWAITE, JORGE A
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name FORD, WILLIAM L
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PAMELA OLMO

CAO

03/14/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GARCIA, JUDITH M DR
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name JAFFE, DAVID L
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name LINK, WENDY SARTORY
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name STEPHENON, DWIGHT
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name GORDON, KENNETH A
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name KESSLER, MICHELE
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name MORGNER, RICHARD W
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121

Title DIRECTOR
Name LOWELL, JACK
Address 14901 NE 20TH AVENUE
City-State-Zip: MIAMI FL 33181-1121