

2013 FLORIDA PROFIT CORPORATION AMENDED 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
P.O. BOX 610002
MIAMI, FL 33261-0002 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

09/13/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CD
Name	LOWELL, JACK
Address	2855 LEJEUNE ROAD
City-State-Zip:	CORAL GABLES FL 33134

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

Title	D
Name	WEAVER, GEORGE W
Address	5300 N FEDERAL HIGHWAY
City-State-Zip:	FT. LAUDERDALE FL 33308

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

Title	T
Name	CARROLL, SHIRLEY C
Address	14901 NE 20TH AVENUE
City-State-Zip:	MIAMI FL 33181

Title	D
Name	ELMORE, GEORGE
Address	2101 S CONGRESS AVENUE
City-State-Zip:	DELRAY BEACH FL 33445

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: SHIRLEY C. CARROLL**TREASURER**

09/13/2013

Electronic Signature of Signing Officer/Director Detail

Date