200% UNIFORM BUSINESS REPORT (UBR)			
DÖCUMENT # 686773			
1. Entity Name			
TELECOM Engineering Consultants Inc.			nc. SECRETARY OF STATE
Principal Place of Business . Mailing Address			
9400 N.W. 25th steed			00 DEC 22 PM 4: 56
MIAMI FL. 33172-1401 Sxme			
2. Principal Place of Business	3. Mailing Address		
			DO MOZINISTE IN TUIO COACE
Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE
City & State	City & State		4. FEI Number 59 - 2030/58 Applied For Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6. Name and Address of Current Registered Agent Name		7. Name and Address of New Registered Agent
Sellati, Valentine			
9400 N.W. 25th St			reet Address (P.O. Box Nurrger is Not Acceptable)
MIAMI FL. 331	72 - 1401	City	
The above named entity submits this statement for	or the purpose of changing its	registered offic	fice or registered agent, or both, in the State of Florida.
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
9. This corporation is eligible to satisfy its Intangible FILE NOWILI FEE IS \$150,00 — 10. Election Campaign Financing \$5.00 May Be— Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00. Trust Find Contribution — \$5.00 May Be— Added to Fees			
(See criteria on back)	Make Check Payab	le to Departi	tment of State
11. OFFICERS AND	□ Delete	12. TITLE	DURE WICOLAS Change MAddition
NAME STREET ADDRESS 12281 SW 104 +CT.	4.	NAME STREET ADDR	11 00 4 11 65 Alle
CITY-ST-ZIP MIRMI F4.		CITY-ST-ZIP	P P C 7 P 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
NAME Sellati, Vahentine	Se. Delete	TITLE NAME	DIRECTOR Change Addition of Jose Richards
STREET ADDRESS CITY-ST-ZIP DAVIC FL. 3332	• •	STREET ADDR	DRESS 10480 5W 113 5T.
TITLE V D	Delete	TITLE	JOSE LOPEZ VICE - President Change Addition
NAME STREET ADDRESS 2025 FLAMING AR	JK.	NAME STREET ADDR	DRESS CORN LABRES FL.
CITY-ST-ZIP Casselberry, FL.	32730	CITY-ST-ZIP	DILORTOL 33155
NAME Sellali Patrick	☐ Delete • J	TITLE NAME	Willie Ousley Change Addition 9400 N.W. 25 m street
STREET ADDRESS 9400 N.W. 254 S CITY-ST-ZIP MAN FL. 3	3 /72	6 ≺STREET: ADDF CITY - ST - ZIP	DRESS- MI AMI EL 2 2/72 INN
TITLE . ST D	☐ Delete	TITLE	☐ Change ☐ Addition
STREET ADDRESS 13650 ROADAKE	Street	NAME STREET ADDE	DRESS
CITY-ST-ZIP DAVE FL. 3	33 25	CITY-ST-ZIP	P Change Addition
NAME	L Delete	NAME	
STREET ADDRESS CITY-ST-ZIP		STREET ADDR	
13. 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 or supplemental 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: Salvan Salvan 11/29/00 305-592-4328			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date			