

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004945

Entity Name: PANDATEL INC.

FILED
Sep 07, 2005
Secretary of State

Current Principal Place of Business:

490 SAWGRASS CORP. PKWY., STE. 330
FORT LAUDERDALE, FL 333256254

New Principal Place of Business:

15330 NW 7TH STREET
PEMBROKE PINES, FL 330281840

Current Mailing Address:

490 SAWGRASS CORP. PKWY., STE. 330
FORT LAUDERDALE, FL 333256254

New Mailing Address:

15330 NW 7TH STREET
PEMBROKE PINES, FL 330281840

FEI Number: 22-3387313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

MARYJO REBIMBAS
15841 PINES BLVD.
SUITE #296
PEMBROKE PINES, FL 330271220 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: MARYJO REBIMBAS

09/07/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: KRAUS, HERNRICH J
Address: PASANENWEG 25, 22745
City-St-Zip: HAMBURG, GERMANY,

Title: VC () Delete
Name: WIENCK, NORBERT
Address: PASANENWEG 25, 22745
City-St-Zip: HAMBURG, GERMANY,

Title: P () Delete
Name: ELAD, ILAN
Address: PASANENWEG 25, 22745
City-St-Zip: HAMBURG, GERMANY,

Title: VPT () Delete
Name: INNE, HOLGER
Address: PASANENWEG 25, 22745
City-St-Zip: HAMBURG, GERMANY,

Title: S () Delete
Name: NIENABEA VON TUERK, SUSANNE
Address: 825 THIRD AVE.
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HOLGER RINNE

VPT

09/07/2005

Electronic Signature of Signing Officer or Director

Date