


2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # F03000004945

1. Entity Name
PANDATEL INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 NOV 15 AM 9:49

Principal Place of Business 15330 NW 7TH STREET PEMBROKE PINES, FL 33028-1840	Mailing Address 15330 NW 7TH STREET PEMBROKE PINES, FL 33028-1840
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2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	10182005 Chg-P CR2E034 (10/03)
City & State	City & State	4. FEI Number 22-3387313
Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additio Fee Required

6. Name and Address of Current Registered Agent MARYJO REBIMBAS 15841 PINES BLVD. SUITE #296 PEMBROKE PINES, FL 33027-1220	7. Name and Address of New Registered Agent
	Name
	Street Address (P.O. Box Number is Not Acceptable)
	City
	FL Zip Code

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 the obligations of registered agent.

SIGNATURE: *Maryjo Rebimbas* (NOTE: Registered Agent signature required when re-issuing) DATE: _____

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN			
TITLE	C	KRAUS, HERNRICH J	<input checked="" type="checkbox"/> Delete	TITLE	CEO	BECKER, THOMAS	<input type="checkbox"/> Change <i>Add</i>
NAME		PASANENWEG 25, 22745		NAME		BARGKOPPELSTIES 14	
STREET ADDRESS		HAMBURG, GERMANY,		STREET ADDRESS		HAMBURG, GERMANY	
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	VC	WIENCK, NORBERT	<input checked="" type="checkbox"/> Delete	TITLE		400061449984	<input type="checkbox"/> Change [
NAME		PASANENWEG 25, 22745		NAME		11/15/05--01075--019 **70.00	
STREET ADDRESS		HAMBURG, GERMANY,		STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	P	ELAD, ILAN	<input checked="" type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Change [
NAME		PASANENWEG 25, 22745		NAME			
STREET ADDRESS		HAMBURG, GERMANY,		STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	VPT	INNE, HOLGER	<input checked="" type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Change [
NAME		PASANENWEG 25, 22745		NAME			
STREET ADDRESS		HAMBURG, GERMANY,		STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	S	NIENABEA VON TUERK, SUSANNE	<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Change [
NAME		825 THIRD AVE.		NAME			
STREET ADDRESS		NEW YORK, NY 10022		STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete	TITLE			<input type="checkbox"/> Change [
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				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 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 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 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *THOMAS BECKER* *Thomas Becker* **CEO** *28.10.2005*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date