FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H38727** **(4)**

1. Corporation Name
TROTEL, INC.

Principal Place of Business	Mailing Address
8000 NW 7TH STREET P.O. BOX 525400 MIAMI FL 33126-4008	8000 NW 7TH STREET P.O. BOX 525400 MIAMI FL 33126-4008

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **01/21/1985**
3a. Date of Last Report: **04/05/1994**

2. Principal Place of Business (21) / 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) / Suite, Apt. #, etc. (27)
City & State (23) / City & State (28)
Zip (24) Country (25) / Zip (29) Country (30)

4. FEI Number: **59-2485854** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BLOUNT, GREGORY L.
8000 NW 7TH STREET
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] FRANK HUCK VP-FINANCE 4/28/95
Signature, typed name(s) of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	BLOUNT, GREGORY L.	12 NAME	
STREET ADDRESS	9711 WEATHERVANE MANOR	13 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	KRUKLES, ROBERT A.	22 NAME	
STREET ADDRESS	13310 SW 49TH ST	23 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	MARTINEZ, MARIO C	32 NAME	
STREET ADDRESS	6451 N. FEDERAL HIGHWAY, STE. 1021	33 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	FETZER, FRED B.	42 NAME	
STREET ADDRESS	8000 NW 7 ST.	43 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	LOHMAN, THOMAS F.	52 NAME	
STREET ADDRESS	251 NORTH SHORE DRIVE	53 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	54 CITY-ST-ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	CHILDS, CARL E JR.	62 NAME	
STREET ADDRESS	641 N. FEDERAL HIGHWAY, RM 901H	63 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 4-27-95 305-265-2447
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0184400 CP