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Apr 20 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # J56450 (6)  
1. Corporation Name  
ABTEL COMMUNICATIONS, INC.

Principal Place of Business  
4001 SE 19TH PLACE  
UNIT B6  
CAPE CORAL FL 33904  
US

Mailing Address  
PO BOX 562  
CAPE CORAL FL 33910  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1637 SE 40TH TR.		26 1637 SE 40TR		02/11/1987	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	
23 CAPE CORAL FL		28 CAPE CORAL FL		59-2817270	
24 33904		29 33904		5. Certificate of Status Desired	
25 USA		30 US		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				9. Name and Address of Current Registered Agent	
				10. Name and Address of New Registered Agent	

PARE, RONALD  
4001 SE 19TH PL B-6  
CAPE CORAL FL 33904

81 Name PARE RONALD  
82 Street Address (P.O. Box Number is Not Acceptable)  
1637 SE 40TH TR  
83 CAPE CORAL  
84 City FL 85 Zip Code 33904

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, typed or printed name 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	PD	1.1 TITLE	VP.
NAME	PARE, RONALD	1.2 NAME	CHARLENE S. PARE
STREET ADDRESS	5362 MALIBU CT	1.3 STREET ADDRESS	1637 SE 40TH TR.
CITY-ST-ZIP	CAPE CORAL FL	1.4 CITY-ST-ZIP	CAPE CORAL FL 33904
TITLE	ST	2.1 TITLE	ST
NAME	PARE, RONALD	2.2 NAME	PARE, RONALD
STREET ADDRESS	5362 MALIBU CT	2.3 STREET ADDRESS	1637 SE 40 TR
CITY-ST-ZIP	CAPE CORAL FL	2.4 CITY-ST-ZIP	CAPE CORAL FL 33904
TITLE	VP	3.1 TITLE	PD
NAME	PARE, ERIC C	3.2 NAME	PARE, RONALD
STREET ADDRESS	5362 MALIBU CT	3.3 STREET ADDRESS	1637 SE 40 TR
CITY-ST-ZIP	CAPE CORAL FL	3.4 CITY-ST-ZIP	CAPE CORAL FL 33904
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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.

CR2E034 (10/97)