

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026825

FILED
Mar 18, 2004
Secretary of State

Entity Name: MONITEL COMMUNICATIONS, L.L.C.

Current Principal Place of Business:

600 NE 36TH ST
SUITE C4-D
MIAMI, FL 33137

New Principal Place of Business:

C/O 20221 N.E 10TH CT
MIAMI, FL 33179

Current Mailing Address:

600 NE 36TH ST
SUITE C4-D
MIAMI, FL 33137

New Mailing Address:

C/O 20221 N.E 10TH CT
MIAMI, FL 33179

FEI Number: 52-2382955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMEVISANET, LC
600 NE 36TH ST
SUITE C4-D
MIAMI, FL 33137

Name and Address of New Registered Agent:

AMERICA VISA NETWORK, LLC
20221 N.E. 10TH CT
MIAMI, FL 33179

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: DEYANIRE GONZALEZ

03/18/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MONITEL,
Address: CARRERA 38 NO. 41-47
City-St-Zip: MEDELLIN, AT 0 CO

Title: MGRM () Delete
Name: GAVIRIA, JAIRO L
Address: 600 NE 36TH ST, SUITE C4-D
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: GAVIRIA, JAIRO L
Address: C/O 20221 N.E 10TH CT
City-St-Zip: MIAMI, FL 33179

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAIRO L.GAVIRIA

MGRM

03/18/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date