2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 20, 2006 08:00 A Secretary of State

ANNUAL REPURI					red 20, 2000 08:00 A			
DOCUMENT # P00000039778					Se	cretary	of State	
1. Entity Nam CEL-TEC	COMMUNICATIONS II, INC.							
Principal Place of Business Mailing Address 2300 W OAKLAND PARK BLVD 2300 W OAKLAND PARK BLV FT LAUDERDALE, FL FT LAUDERDALE, FL								
D	O NOT WRITE	IN THIS SPA	CE	02032006 4. FEI Numbe 65-102	No Chg-P	CR2E034 (1		
	6. Name and Address of Current Rec	Istered Agent		,		,	· · · · · · · · · · · · · · · · · · ·	
GOLDSTEIN, STEPHEN J 2300 W OAKLAND PARK BLVD FT LAUDERDALE, FL				IN 7	NOT W THIS SP	ACE		
	named entity submits this statement for the ions of registered agent. Signature, typed or proted name of registered agent and to		ed office or registe		th, in the State of Flo	rida. I am familia	r with, and accept	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution.				.00 May Be ded to Fees				
10. TITLE NAME STREET ADDRESS GTY-ST-ZIP	OFFICERS AND DIF PD BERCUN, SHERRY 2300 W OAKLAND PARK BLVD FT LAUDERDALE, FL	ECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD FITZGERALD, LYNN 2300 W OAKLAND PARK BLVD FT LAUDERDALE, FL				11797976 13708/05	14 4 1618 -80043-00	06 150.00	
NAME STREET ADDRESS CUTY-ST-ZIP					NOT W			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				IN	THIS SF	ACE		
STATE			3					

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 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 10 or Block 11.1f changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

STREET ADDRESS
CITY-ST-ZIP
TYTLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/06.

954-485-4400