

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 91022 050 ***150.00

DOCUMENT # P01000055619

1. Entity Name
CABELTEL INTERNATIONAL CORPORATION



Principal Place of Business
**4395 FOXTAIL LANE
WESTON FL 33331**

Mailing Address
**4395 FOXTAIL LANE
WESTON FL 33331**

2. Principal Place of Business

4765 NW 103th Ave.

3. Mailing Address

OK

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SUNRISE

City & State

Zip

33351

Country

Broward

Country

4. FEI Number

65-1109209

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**TOVAR DEL CORRAL, JOSE G
ARIAS TOVAR & ASSOCIATES PA
9900 STIRLING ROAD SUITE 222
HOLLYWOOD FL 33024**

7. Name and Address of New Registered Agent

Name

JOSE G. TOVAR

Street Address (P.O. Box Number is Not Acceptable)

ARIAS TOVAR & ASSOCIATES, P.A.

1725 MAIN STREET, SUITE 205

City
WESTON

FL

Zip Code
33326

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 accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and is not applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Registered Agent

28 FEB 03

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MARCO, MARIANO	
STREET ADDRESS	4395 FOXTAIL LANE	
CITY-ST-ZIP	WESTON FL 33331	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	LISIO, MAURICIO	
STREET ADDRESS	4395 FOXTAIL LANE	
CITY-ST-ZIP	WESTON FL 33331	
TITLE	TD	<input type="checkbox"/> Delete
NAME	JULIAO, MARIA VICTORIA	
STREET ADDRESS	4395 FOXTAIL LANE	
CITY-ST-ZIP	WESTON FL 33331	
TITLE	V	<input type="checkbox"/> Delete
NAME	VIDAL, HUMBERTO	
STREET ADDRESS	4395 FOXTAIL LANE	
CITY-ST-ZIP	WESTON FL 33331	
TITLE	X	<input type="checkbox"/> Delete
NAME	GONZALEZ, WILLIAM E	
STREET ADDRESS	4295 FOXTAIL LN	
CITY-ST-ZIP	FORT LAUDERDALE FL 33331	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**SECRETARY/DIRECTOR X
GONZALEZ, WILLIAM E.
4395 FOXTAIL LANE
WESTON, FL 33331**

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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)