2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000088196

PEREIRA, SERGIO

12617 N.W. 23RD STREET

PEMBROKE PINES, FL 33028

Name:

Address:

City-St-Zip:

Entity Name: UNETEL, INC.

FILED Apr 29, 2005 Secretary of State

Littly Na	ille. ONETEL	., IIVC.		
Current Principal Place of Business:			New Principal Place of Business:	
STE 230	/GRASS COR , FL 33323	PORATE PKWY		
Current Mailing Address:			New Mailing Address:	
STE 230	/GRASS COR , FL 33323	PORATE PKWY		
FEI Number	: 65-1135950	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:
	PHILIPPE / 23 STREET KE PINES, FL	33028 US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
SIGNATUI	RE: LENOIR	PHILIPPE		
	Electro	nic Signature of Registered Ag	ent	Date
		93(2)(b), F.S., the corporation did nong Trust Fund Contribution().	ot receive the prior notice.	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LENOIR, PHIL 12617 NW 23		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MUTOMBO, N 12617 NW 23		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	NTALE, LEON 12617 NW 23		Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	CFO () Delete	Title:	() Change () Addition

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: LENOIR PHILIPPE P 04/29/2005