

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2008 8:00 am
Secretary of State

01-25-2008 90048 001 ***300.00

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1. Entity Name
SUPER-TEL.COM, INC.



Principal Place of Business

**16500 NW 7TH AVE.
STE 330
MIAMI, FL 33169**

Mailing Address

**16500 NW 7TH AVE.
STE 330
MIAMI, FL 33169**

66000328.



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
90-7761243

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**TERWILLIGER, THOMAS E
16500 NW 7TH AVE.
STE 330
MIAMI, FL 33169**

**DO NOT WRITE
IN THIS SPACE**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME TERWILLIGER, THOMAS
STREET ADDRESS 16500 NW 7TH AVE., STE 330
CITY-ST-ZIP MIAMI, FL 33169

TITLE D
NAME YOUNG, MARY N
STREET ADDRESS 16500 NW 7TH AVE., STE 330
CITY-ST-ZIP MIAMI, FL 33169

TITLE D
NAME JN-GUILLAUME, ADINE
STREET ADDRESS 16500 NW 7TH AVE., STE 330
CITY-ST-ZIP MIAMI, FL 33169

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address, with or without other like empowered.

SIGNATURE:

Thomas E. Terwilliger director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/31/07
Date

786 267 7944
Daytime Phone #