2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2007 08:00 A Secretary of State

ANNUAL REPORT						
DOCUMENT # P04000 1. Entity Name NU-TEL COMMUNICATIONS, IN						
Principal Place of Business	Mailing Address					
3405 N.W. 9TH AVE., STE. 1204	3405 N.W. 9TH AVE., STE. 120)4				
FORT LAUDERDALE, FL 33309	FORT LAUDERDALE, FL 33309	€				

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DO NOT WRITE IN THIS SPACE		03112007 4. FEI Numb 20-105	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
6. Name and Address of Current Regis	itered Agent		<u> </u>		1 de Naquilea
VESGA, GERMAN E P 1844 NW 128TH AV PEMBROKE PINES, FL 33028		·		NOT W THIS SP	
3. The above named entity submits this statement for the part the obligations of registered agent. Signature, typed or printed name of registered agent and title.		ed office or regist		oth, in the State of Flo	orida. I am familiar with, and accept
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.		5.00 May Be ided to Fees		1
INTLE VESGA, GERMAN ED 1844 NW 128TH AVE. PEMBROKE PINES, FL 33028 INTLE STREET ADDRESS CITY-S1-ZIP PEMBROKE PINES, FL 33028	CTORS			U00000 05/15/07-	742146 80057-016 150.00
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ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this indicated on this report or suppliemental report is true of the corrogation of the recover or trusted among the recover of the recovery of the recovery or trusted among the recovery of	filing does not qualify for the exe	emptions contain ture shall have th	ed in Chapter 11: e same legal effe	9, Florida Statutes. I ct as if made under o	further certify that the information path; that I am an officer or director

12. Thereby certify that the information supplied with this filling coes not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplier entail 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 application of the empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #