

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000118446

FILED
Nov 28, 2007
Secretary of State**Entity Name:** CTEL, INC.**Current Principal Place of Business:**3400 NE 192 STREET
1805
AVENTURA, FL 33180 US**New Principal Place of Business:****Current Mailing Address:**3400 NE 192 STREET
1805
AVENTURA, FL 33180**New Mailing Address:****FEI Number:** 16-1719764 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**VALDES, GUSTAVO
3400 NE 192 ST.
1805
AVENTURA, FL 33180 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** P () Delete
Name: VALDES, GUSTAVO
Address: 3400 NE 192 ST. #1805
City-St-Zip: AVENTURA, FL 33180 US**Title:** ST () Delete
Name: VALDES, ZOILA
Address: 3400 NE 192 ST. #1805
City-St-Zip: AVENTURA, FL 33180 US**Title:** V (X) Delete
Name: KINCAID, KEN
Address: 285 N.E. 185TH STREET #28
City-St-Zip: NORTH MIAMI BEACH, FL 33179**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: GUSTAVO VALDES

P

11/28/2007

Electronic Signature of Signing Officer or Director_____
Date