FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 20 PM 3:37

DOCUMENT # P39726 (5)

1. Corporation Name
SUPERTEL COMMUNICATIONS, INC.

Principal Place of Business	Mailing Address
12526 HIGH BLUFF DR. SUITE 210 SAN DIEGO CA 92130	12526 HIGH BLUFF DR. SUITE 210 SAN DIEGO CA 92130

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21
Suite, Apt. #, etc. 22
City & State 23
Zip 24 Country 25

2a. Mailing Address 26
Suite, Apt. #, etc. 27
City & State 28
Zip 29 Country 30

3. Date Incorporated or Qualified: 07/16/1992
3a. Date of Last Report: 05/01/1994
4. FEI Number: 33-0484854 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SMIKIN, CAREY
STREET ADDRESS	12526 HIGH BLUFF DR.
CITY-ST-ZIP	SAN DIEGO CA
TITLE	D
NAME	SIMKIN, BERNARD C.M.
STREET ADDRESS	12526 HIGH BLUFF DR.
CITY-ST-ZIP	SAN DIEGO CA
TITLE	S
NAME	HORNER, BARBARA
STREET ADDRESS	12526 HIGH BLUFF DR
CITY-ST-ZIP	SAN DIEGO CA
TITLE	CFO
NAME	ESPY, RHONDA
STREET ADDRESS	12526 HIGH BLUFF DR.
CITY-ST-ZIP	SAN DIEGO CA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	CFO	XX Change ☐ Addition
4.2 NAME	JONES, ROBERTA	
4.3 STREET ADDRESS	12526 HIGH BLUFF DR.	
4.4 CITY-ST-ZIP	SAN DIEGO, CA 92130	
5.1 TITLE	VP	☐ Change XX Addition
5.2 NAME	FASCHING, STEVEN	
5.3 STREET ADDRESS	125265 HIGH BLUFF DR.	
5.4 CITY-ST-ZIP	SAN DIEGO, CA 92130	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Roberta Jones ROBERTA JONES 2/13/95 (619) 451-0180
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0461706 FP