Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90114 024 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000012647

1. Corporation Name

SYDTEL	CORP.								
Principal Place	of Rusiness	Mailing Address					ilk dåla t H a t	O INDIA DICELO	{ 0 1
3325 GRIFFIN R		3325 GRIFFIN RD							
STE 100 STE 100									
FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312						DO NOT WRITE IN	1 THIS SE	ACE	
US US						3. Date Incorporated or Qualifed			
						12/17/1992			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		H ''	plied For
21		26				65-0387830			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			<u> 3-</u>	5. Certificate of Status Desired	-	\$8.75 A Fee Re	I
City & State	e	City & State	City & State			6. Election Campaign Financing	l	\$5.00	
23		28				Trust Fund Contribution		Added to	o Fees
Zip	Country	Zip	Count	ry		8. This corporation owes the current y			
24	25 29 30		30			Personal Property Tax.			□No
	9. Name and Address of Curre	nt Registered Agent			• 1	10. Name and Address of New Regis	stered Ag	ent	
DUE	ALLIT EDANCOR		8	11	Name				
RHEAULT, FRANCOIS 1511 STILLWATER DRIVE			8	2	Street Addres	et Address (P.O. Box Number is Not Acceptable)			
MIAN	AII BEACH FL 33141		8	33		. 		,	
	•	•	8	4	City	· · · · · · · · · · · · · · · · · · ·	FL	85 Zip C	Code
	· /-	20 and 607 4509. Florido Statutos	the she	<u> </u>	nomed corner	ration submits this statement for the purp		anging its	registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida, Such change was all	thorizad t	างเก	e corporation	's board of directors. I hereby accept the	appointn	nent as reg	gistered
SIGNATURE					ignature required v		DATE		
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	gent si	ignature required r	ADDITIONS/CHANGES TO OFFICE		DIRECTO	RS IN 12
TITLE	DP OTTICERS A	□ DELETE	1.1 TITLE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition
NAME	_		1.2 NAM						
STREET ADDRESS	1511 STILLWATER DRIVE		1.3 STREET ADDRESS		DDRESS				
\			1.4 CITY						Ì
CITY-ST-ZIP TITLE			2.1 TITLE		-11			Change	Addition
			2.2 NAM						J
NAME OTDEET ADDRESS			2.3 STREET ADDRESS		nnerss			*	Ì
STREET ADDRESS			2.4 C/T						
, CITY-ST-ZIP TITLE			3.1 TITL		ZIF			Change	Addition
NAME	_		3.2 NAM						
			3.3 STRI		DORESS				
STREET ADDRESS	1			3.4. CITY-ST-ZIP					Ì
CITY-ST-ZIP				4.1 TITLE				Change	☐ Addition
NAME		_	4, 2 NAME		1				
STREET ADDRESS			4.3 STRI		DDRESS				
CITY-\$T-ZIP			4.4 CITY						
TITLE		☐ DELETE	5.1 TITLI				-1	Change	Addition
NAME		*****	5.2 NAM						
STREET ADDRESS			. 5.3 STRI	EET AC	DDRESS	,			
CITY-ST-ZIP			5.4 CITY	-ST-2	ZIP	•			ļ
TITLE		☐ DELETE	6.1 TITLI	E	 			Сһапде	☐ Addition
NAME			6.2 NAM	E					
OTHER ADDRESS			63 STR	FFT AI	DDRESS				

14. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual poort 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 protected to execute this opport 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, with all other like improvered. SIGNATURE:

CITY-ST-ZIP

Daytime Phone #