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

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P93000033024 (9)

**NEVATEL, INC.** 

Principal Place of	Business
201 COUNTRYSIDE	DR

Mailing Address

201 COUNTRYSIDE DR NAPLES FL 34104-6721

## FILED Feb 18 1997 8:00am Secretary of State



NAPLES FL 33942		NAPLES FL 34104-6721					
					3. Date Incorporated or Qualified 05/03/1993	3a. Date of Last 04/18/1996	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For
21 26					65-0471965		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City &		City & State	<del></del>		6. Election Campaign Financing	\$5.0	0 May Be
23		28			Trust Fund Contribution		d to Fees
Zip	Country	Zip	Countr	у	8. This corporation has liability for in	. • _	s. 199.032,
24	25		10			Yes No	
	9. Name and Address of Curre	ent Registered Agent	8	Nessa	10. Name and Address of New Reg	istered Agent	
	D, JOYCE M		18	Name			
	COUNTRYSIDE DR		83	Street Addr	ess (P.O. Box Number is Not Acceptab	le)	
NAPI	LES FL 33942			ļ			
			83				
			84	City	<u></u>	F1 85 Zi	Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statutes	the above	re-named corp	oration submits this statement for the p	urpose of changing	its registered
office or re	egistered agent, or both, in the Sta im familiar with, and accept the obli	te of Florida. Such change was au	thorized b	v the corporat	ion's board of directors. I hereby accep	t the appointment a	is registered
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable. (NCIE).	Registered Ac	ent signature requir	ed when reinstaling)	DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	ORS IN 12
TIFLE	D	DELETE	1.1 TITLE			☐ Change	Addition
NAME	LAND, JOYCE M		1.2 NAME				
STREET ADDRESS	201 COUNTRYSIDE DR		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	NAPLES FL 33942		1.4 CHY-	ST-ZIP			
TITLE	VP	DELETE	21 TITLE	1		Change	Addition
NAME	LAND, ROBERT E B		2.2 NAME				
STREET ADDRESS	201 COUNTRYSIDE DE		2.3 STREE	T ADDRESS			
CITY - ST - ZIP	NAPLES FL	The same	2 4 CITY	ST-ZIP			
TITLE		DELETE	3.1 TITLE			☐ Change	: Addilion
NAME			3.2 NAME				
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NAME			4. 2 NAMI				
STREET ADDRESS				1 ADDRESS			
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NAME		☐ bereig	5.1 TITLE			☐ cuange	Addition
			5.2 NAME	T ADDOLOG	·		
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY- 6.1 TITLE	21-7Ib		Change	Addition
NAME						Change	
			6.2 NAME	* *DDDEDG			
STREET ADDRESS			6.3 STREE	T ADDRESS [			
CITY - ST - ZIP			6.4 CITY-	nz 710			

14. I do hereby certify that the information supplied with this filing does not qualify 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 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.

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2E034 (9/96)