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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000033024 (9)

NEVATEL, INC.

FILED Mar 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address) IIIII 49 114 IIB	11 4181 1981		
201 COUNTRYSIDE DR 201 COUNTRYSIDE DR												
NAPLES FL 33	1942	NAPLES	NAPLES FL 33942					DO NOT WRITE IN THIS SPACE				
								3.	Date Incorporated or Qualified			
									05/03/1993			
2. Principal Pl	ace of Business	2a. Mailir	2a. Mailing Address				4.	FEI Number		Ap	plied For	
21		26					<u>65-0471965</u>			t Applicable		
Suite, Apt. i	#, etc.		Suite, Apt. #, etc.				5.	Certificate of Status Desired		\$8.75		
22		27								Fee Re		
City & State)	——————————————————————————————————————	City & State				6.	Election Campaign Financing		\$5.00 Added t		
Zip Country			28 Zin	Zip Country				-	Trust Fund Contribution			
24	25	ournity.	— — ·	29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24		ddress of Curre		Agent	1001			10.	Name and Address of New R		Agent	
LAN	ID, JOYCE M				Ü	81	Name					
	COUNTRYSIDE					82 Street Address (P.O. Box Number is Not Acceptable)						
	PLES FL 33942						Address (F.O. Dox Nambor to Not Proceptable)					
						83	City			<u> </u>	es Zin (Code
						84	City			<u>FL</u>	'	
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 little if applicable. (NOTE: Re						d Apei	ni signature re		n reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTOR	IS IN 12
12.	Ď	OFFICERS AN	ID DIRECTORS	DELETË	13.	TLE			ADDITIONS/CHANGES TO OFF	OLING AND	Change	Addition
NAME	LAND, JOYCE	: M			1.2 N/						_ *	_
STREET ADDRESS	201 COUNTR						.3 STREET ADORESS					
CITY-ST-ZIP	NAPLES FL 3						-ST-ZIP					İ
TITLE	VP			☐ DELETE	2.1 TI						Change	Addition
NAME	LAND, ROBER	RT E B			2.2 N	AME						
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TITLE				☐ DELETE	3.1 TI	TLE					L Change	Addition
NAME					3.2 N/	ME						
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CITY-ST-ZIP					3.4. C	_	T-ZIP		 		T Observe	Addition
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NAME					4. 2 N							į
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STREET ADDRESS					5.4 CI							
CITY-ST-ZIP TITLE				DELETE	6.1 TI		411				Change	Addition
NAME					6.2 N							Į
STREET ADDRESS	;				- 1		ADORESS					ŀ
CITY-ST-ZIP					6.4 CI							ŀ
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I 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.