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 #

P93000053507 (8)

PECTEL, INC.

FILED May 01 1998 8:00am Secretary of State



| Principal Place | of Business | Mailing Address | | | |
|---|--|--|----------------------------|----------------|---|
| 306 SW 6TH | | P.O. BOX 331501 | | | |
| MIAMI FL 331 | | MIAMI FL 33233-1501 | | | |
| US | | US | | | DO NOT WRITE IN THIS SPACE |
| | | | | | 3. Date Incorporated or Qualified |
| A Delmainal Di | ace of Business | 2a. Mailing Address | | | 07/30/1993 4. FEI Number Applied For |
| | . // // / | | | | 65-0426655 Not Applicable |
| 21 (2) Suite, Apt. | | Suite, Apt. #, etc. | | | S8 75 Additional |
| | 1200R, #EI | 27 | | | 5. Certificate of Status Desired Fee Required |
| City & State | | City & State | . | | Election Campaign Financing \$5.00 May Be |
| 23 MIF | | 26 | | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | Country | | 8. This corporation owes or has paid the current year Intangible |
| 24 331 3 | 162 A2W [25] | 29 | 0 | | Personal Property Tax due June 30. XYes No |
| | 9. Name and Address of Current R | egistered Agent | | | 10. Name and Address of New Registered Agent |
| MA | RGOLIS, JOHN A ESQ | | 81 | Name | |
| 9990 SW 77TH AVE | | | | Street A | Address (P.O. Box Number is Not Acceptable) |
| SUITE 330 | | | | 0 | (|
| | AMI FL 33156 | | 83 | | |
| | | | 84 | City | 85 Zip Code |
| | | | 4 | City | FL S 245 CCCC |
| 11. Pursuant t | to the provisions of Sections 607.0502 a | nd 607.1508, Florida Statutes, | , the above | -named | corporation submits this statement for the purpose of changing its registered |
| office or re agent, I ar | egiste red agent, or both, in the State of m fam iliar with, and accept the obligatio | Horida. Such change was aut ins of, Section 607,05 0 5, Florid | inorized by da Statutes | the corp | oration's board of directors. I hereby accept the appointment as registered |
| SIGNATURE | | , | | | |
| SIGNATURE | Signature typed or printed harne of registered agent a | nd title if applicable (NOTE: F | Registered Age | nt signature i | required when reinstaling) DATE |
| 12. | OFFICERS AND D | | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PSD | DELETE | 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME | PHILLIPS, MICHAEL | | 1.2 NAME | | |
| STREET ADDRESS | 9990 SW 77TH AVENUE #330 | | 1.3 STREET | address | T . |
| CITY-ST-ZIP | MIAMI FL 33156-2699 | | 1.4 CITY-ST | r-zip | |
| TITLE | VP | ☐ DELETE | 2.1 TITLE | | Change Addition |
| NAME | MITCHELL, PETER E. | | 2.2 NAME | | 1221 BRICKELL AVE, 9th FLATEI |
| STREET ADDRESS | 9990 SW 77TH AVE., #330 | 1 | 2.3 STREET | address | 1221 BRICKELL HVE, 9"PL#EI |
| CITY-ST-ZIP | MIAMI FL | | 2.4 CITY-S | T-ZIP | MIAMI, FC 33131 |
| TITLE | | DELETE | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 3 2 NAME | | |
| STREET ADDRESS | | | 3 3 STREET | address | |
| CITY-ST-ZIP | | · · · · · · · · · · · · · · · · · · · | 3 4. CITY - S | T-ZIP | |
| TITLE | | ☐ DELETE | 4.1 TITLE | ļ | ☐ Change ☐ Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4 3 STREET | address | |
| CITY-ST-ZIP | | | 4.4 CITY-S | T- ZIP | |
| TITLE | | ☐ DELETE | 51 TITLE | ľ | ☐ Change ☐ Addition |
| NAME | | | 52 NAME | | |
| STREET ADDRESS | | | 53 STREET | | |
| CITY-ST-ZIP | | T serete | 5.4 CITY-SI | I - ZIP | [] Ob |
| TITLE | | ☐ DELETE | 61 TITLE | l | Change Addition |
| NAME . | | | 6.2 NAME | j | |
| STREET ADDRESS | | | 63 STREET | | |
| CITY-ST-ZIP | | INTO Class does not small find | 6.4 CITY-ST | | d in Caption 110 07/2Vi). Florida Statuton Liuribar annihi that the information |
| 14. 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 aroual 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 corporative 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 inchanged, or an attachment with an address. | | | | | |
| DIOCK 12 OF DIOCK TO INCHIBITION, OF THE AMERICAN HOUSES. | | | | | |