## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **FILED** FLORIDA DEPARTMENT OF STATE May 26 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** P94000035074 (1) DOCUMENT # FIBERTEL COMMUNICATIONS, INC. Principal Place of Business Mailing Address 1100 MANGO ISLE 1100 MANGO ISLE FT LAUDERDALE FL 33315 FT LAUDERDALE FL 33315-1330 3. Date Incorporated or Qualified 3a. Date of Last Report 05/06/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0486205 26 Not Applicate Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country 8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes No Yes 29 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name <del>STALDER, RI</del>CHARD J. 1100 MANGO ISLE Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33315 .83 City 85 Zip Code 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) 12. OFFICERS AND DIRECTORS 13. O OFFICERS AND DEPLOTORS PD TITLE DELET 1.1 TITLE Channe STADLER, RICHARD J NAME 1.2 NAME 1100 MANGO ISLE STREET ADDRESS TONIT NOT WE DELETE 1.3 STREET ADDRESS FT LAUDERDALE F CITY - ST - ZIP 1.4 CiTY-ST-ZiF TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.1 STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE TITLE NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 3 4. CITY-ST-ZIP TITLE NAME 4. 2 NAME

14. If do hereby certify that the information supplied with this filling does not greatly to the exemption stated in Section 119.07(3)(i), Florida Statutes. If further certify that the information indicated on this annual report or suppliermental annual

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