

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

FILED

May 02 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000049436 (4)

1. Corporation Name  
ENTERTEL GROUP INTERNATIONAL, INC.

Principal Place of Business  
1059 COLLINS AVE.  
SUITE 1197  
MIAMI BEACH FL 33139

Mailing Address  
1059 COLLINS AVE.  
SUITE 1197  
MIAMI BEACH FL 33139-5011



2. Principal Place of Business

21 100 LINCOLN RD.

Suite, Apt. #, etc.

22 SUITE 1125

City & State

23 MIAMI BEACH, FL

Zip

24 33139

Country

25 U.S.A.

2a. Mailing Address

26 1521 ALTON RD.

Suite, Apt. #, etc.

27 SUITE 319

City & State

28 MIAMI BEACH, FL.

Zip

29 33139

Country

30 U.S.A.

3. Date Incorporated or Qualified

06/10/1996

3a. Date of Last Report

N/A

4. FEI Number

65-0671131

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

FROMAN, JULIE  
1059 COLLINS AVE.  
SUITE 1197  
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81 Name FROMAN, JULIE  
82 Street Address (P.O. Box Number is Not Acceptable)  
1521 ALTON RD.  
83 SUITE 319  
84 City MIAMI BEACH, FL 85 Zip Code 33139

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

(NOTE: Registered Agent signature required when reinstating)

4/25/97

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME FROMAN, JULIE  
STREET ADDRESS 1059 COLLINS AVE. STE 1197  
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE SD ☐ DELETE

NAME WALL, JEFFREY  
STREET ADDRESS 1059 COLLINS AVE. STE 1197  
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME FROMAN, JULIE  
1.3 STREET ADDRESS 1521 ALTON RD. SUITE 319  
1.4 CITY-ST-ZIP MIAMI BEACH, FL. 33139

2.1 TITLE SD ☒ Change ☐ Addition

2.2 NAME WALL, JEFFREY  
2.3 STREET ADDRESS 1521 ALTON RD. SUITE 319  
2.4 CITY-ST-ZIP MIAMI BEACH, FL. 33139

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

Jeffrey Wall (Corporate Secretary) 4/14/97 (305) 535-8255

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)