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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P98000059734

COIN-TEL UNLIMITED, INC.

Principal Place of Business

17100 COLLINS AVENUE SUITE 207

MIAMI BEACH FL 33160-3675

Mailing Address

17100 COLLINS AVENUE

SUITE 207

MIAMI BEACH FL 33160-3675

## May 05, 1999 8:00 am Secretary of State

05-05-1999 90214 021 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

Sulfe, ART, \$ e15					07/07/1998		
Suite. Apt. 4, etc.  Suite. Apt. 5, etc.  Suite. Apt. 6, etc.  Suite. Ap	2. Principal Pl	ace of Business	2a. Mailing Address	- 5/	4. FEI Number	Applied For	
City & State    City & State	21 /72°	SNM 19 14.	26 7925 NW	(3 steer		Not Applicable	
AMERILAWYER  AMERILAWYER  AS ALMERIA ARCHUE  CORAL GABLES FL 33134  TILE  TRUST Fund Contribution  S. Name and Address of Current Registered Agent  AMERILAWYER  AS ALMERIA ARCHUE  CORAL GABLES FL 33134  TILE  TORAL GABLES FL 3314  TILE  TORAL GABLES FL 33134  TILE  TORAL GABLES FL 33160-3675  TORAL GABLES FL 33160	<del>-</del>	#. etc 318			5. Certifcate of Status Desired	, - ·	
20   20   20   20   20   20   20   20	City & State			•	6. Election Campaign Financing	\$5.00 May Be	
AMERILAWYER  343 ALMERIA AVENUE CORAL GABLES FL 33 134  85  Sured Agents A MANAGE SELECT SERVICES  864  City Number 1 No. Number 1 No. Application of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In artiflaring with, and accept the obligations of, Section 607.0505, Provide Statutes.  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 agent. In artiflaring with, and accept the obligations of, Section 607.0505, Provide Statutes.  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes.  12. VIALLE STATUTE STATUT	23 MIA	MI, T.	28 MIAMI, 17	<b>L</b>	Trust Fund Contribution	Added to Fees	
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AMERILAWYER  343 ALMERIA AVENUE  CORAL GABLES FL 33134  82 Street_address_K** O_BXN ymmbgr_is_Not_adspetability.  83 Surf E_3/8  84 City		9. Name and Address of Current	Registered Agent				
343 ALMERIA AVENUE CORAL GABLES FL 33134  82 Street Address RO Dox Number 1 Not Adoptable 1  83 Suffer 3/8  84 City Night FL 85 Zig Code City Night	A. MARA A CALLENT LEVY/CAR						
CORAL GABLES FL 33134    83				82 Street Ag	· · · · · · · · · · · · · · · · · · ·		
Superior		_		7	725 NW 12 STREET		
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, and accept the obligations of, Section 607.0502, Florida Statutes.    TAX   MANAGEMENT   Signature, Type or principle of position of the purpose of changing its registered agent, and accept the obligations of, Section 607.0502, Florida Statutes.   TAX   MANAGEMENT   Signature, Type or principle of the purpose of changing its registered agent, and accept the obligations of, Section 607.0502, Florida Statutes.   TAX   MANAGEMENT   Signature, Type or principle of the purpose of changing its registered agent, and the pointment as 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, 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, 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, or both in the significant of the purpose of changing its registered agent, or both the corporation's board of directors. I hereby accept the appointment as registered agent, or both the corporation's board of directors. I hereby accept the appointment as registered agent, or both the corporation's board of directors. I hereby accept the appointment are registered agent, or both the corporation's board of directors. I hereby accept the appointment as registered agent, or both the corporation and the proposed agent the purpose of the appointment as registered agent, or both the corporation and the proposed agent the purposed of the purposed of the purposed of the	CUR	AL GADLES PL 33134	Cute 318				
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office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent, and accept the obligations of, Section 607 (NOTE-Registered Agent signature). Many many many many many many many many m					MIAMI	FL 33126	
Agent. I am familigr with, and accept the obligations of, Section 607.0505, Florida Statules.    TAX   MANAGENIEM   Superior Section 607.0505, Florida Statules.   Manageniem   Manageniem	11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named co	orporation submits this statement for the purpo	se of changing its registered	
SIGNATURE  TAX NASHGEMENT SEVS. LORD. HODDWILLING Signature, hyper or printed name of irregisteric agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PD SPELETE 1.1 TITLE PD CHEHEBAR, DAVID 1.2 NAME CHEHEBAR, DAVID 1.2 NAME 1.3 STREET ADDRESS 1.1 TO COLLINS AVENUE 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP NAME AGRELLA, DARYLL 2.2 NAME AGRELLA, DARYLL 2.2 NAME AGRELLA, DARYLL 2.2 NAME 1.7 100 COLLINS AVENUE - 1.7 STREET ADDRESS 1.7 100 COLLINS AVENUE - 1.7 1	office or re	egistered agent, or both, in the State o m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	a Statutes. 🐧	ation's board of directors. Thereby accept me	appointment as registered	
Signature, typed or printed name of regulatived agent and title if appicable   (NOTE_Regulatored Agent age	•	Car Alamaa	- 5 000	Lina	milant 41	129199	
TITLE PD CHEHEBAR, DAVID CHEHEBAR, DAVID 12 NAME 12 NAME 15 STREET ADDRESS CITY-ST-ZP MIAMI BEACH FL 33160-3675  TITLE VD AGRELLA, DARYLL 22 NAME 23 STREET ADDRESS CITY-ST-ZP MIAMI BEACH FL 33160-3675  TITLE SD CHEHEBAR, MORRIS 33 STREET ADDRESS CITY-ST-ZP MIAMI BEACH FL 33160-3675  TITLE T CHEHEBAR, MORRIS 33 STREET ADDRESS CITY-ST-ZP MIAMI BEACH FL 33160-3675  TITLE T CHEHEBAR, MORRIS 33 STREET ADDRESS CITY-ST-ZP MIAMI BEACH FL 33160-3675  TITLE T CHEHEBAR, GABRIEL 17100 COLLINS AVENUE 43 STREET ADDRESS CITY-ST-ZP MIAMI BEACH FL 33160-3675  TITLE T CHEHEBAR, GABRIEL 51 TITLE CHEBAR, GABRIEL 17100 COLLINS AVENUE 43 STREET ADDRESS CITY-ST-ZP MIAMI BEACH FL 33160-3675  TITLE T CHEHEBAR, GABRIEL 51 TITLE CHEBAR, GABRIEL 51 TITLE CHEBAR GA	SIGNATURE .			gistered Agent signature req		TE (	
Table   Chember   Chembe	12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER		
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CITY-ST-ZIP 6.4 CITY-ST-ZIP							
14. I hereby certify that the information supplied with this filling 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	14. I hereby c	ertify that the information supplied with	n this filing does not qualify for th	ne exemption stated i	in Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information	

Block 12 or Block 13 if change

SIGNATURE: <