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2000 UNIFORM BUSINESS REPORT (UBR)

FILED
00 APR -4 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000014190

1. Entity Name

XTEL INC.

Principal Place of Business	Mailing Address
2514 HOLLYWOOD BLVD., STE 404 HOLLYWOOD FL 33020	2514 HOLLYWOOD BLVD., STE 404 HOLLYWOOD, FL 33020-6634

REINSTATEMENT

2. Principal Place of Business	3. Mailing Address
999 Brickell Ave.	999 Brickell Ave
Suite, Apt. #, etc. 700	Suite, Apt. #, etc. 700
City & State Miami FL	City & State Miami FL
Zip 33131 Country USA.	Zip 33131 Country USA

4. FEI Number
65-0916233

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROSENTHAL, ALEX P ESQ.
REIMER & ROSENTHAL LLP
3801 HOLLYWOOD BLVD. SUITE 350
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

Name: TOM Crake

Street Address (P.O. Box Number is Not Acceptable):
999 Brickell Ave
Suite 700

City: Miami FL Zip Code: 33131

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: [signature] 3/31/00
Signature, typed or printed name of registered agent and title if applicable — Date

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO Joe Orriols 999 Brickell Ave Miami FL 33131	☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Executive VP. Tom Crake 999 Brickell Avenue Miami FL 33131	☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Aldo Botti 1321 NW 14th St. suite 400 Miami FL 33125	☐ Delete	☐ Change ☐ Addition 600003193656--4
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Vincent Gorham 999 Brickell Ave Miami FL 33131	☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 3/31/00 KE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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attachment

THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 648098 7210069

AUTHORIZATION :

COST LIMIT : $ ~~[illegible]~~ 758.75

Patricia Pyfitt

ORDER DATE : April 3, 2000

ORDER TIME : 12:42 PM

ORDER NO. : 648098-005

CUSTOMER NO: 7210069

CUSTOMER: Thomas J. Crane, Esq
Thomas J. Crane, Esquire
432 Bayside Avenue

Naples, FL 34108

DOMESTIC FILINGS

RECEIVED
00 APR -3 PM 2:24
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

NAME: XTEL, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS _____