FILED

03 SEP 11 PM 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ammended

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S51090

1. Entity Name
NEBUTEL, INC.

Principal Place of Business	Mailing Address
907 E. STRAWBRIDGE AVE SUITE D MELBOURNE, FL 32901	907 E. STRAWBRIDGE AVE SUITE D MELBOURNE, FL 32901

200023277712
09/23/03--01037--019 **61.25

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

X CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3070590 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HALL, LAURENCE A JR. 907 STRAWBRIDGE AVE SUITE D MELBOURNE, FL 32901	Name Street Address (P.O. Box Number Is Not Acceptable) City FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HOFFMAN, THOMAS C. 473 RED SAILWAY SATELLITE BEACH, FL 32937	X Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD FRED BRUNSON 120 W. CARROLL STREET KISSIMMEE, FL 34741 ☐ Change X Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HALL, LAWRENCE A. JR 1208 E. RIVER DRIVE UNIT #101 MELBOURNE, FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GEIST, ARDEN JR 4904 WILD GRAPE WAY MELBOURNE, FL 32940	X Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Laurence A. Hall Jr. LAURENCE A. HALL JR. 9/10/03 (321) 951-1717
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #