

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **S87031 (8)**  
1. Corporation Name  
**FIBERTEL INC.**



Principal Place of Business

**7961 NW 14 STREET  
MIAMI FL 33126**

Mailing Address

**7961 NW 14 ST.  
MIAMI FL 33126  
US**

3. Date Incorporated or Qualified  
**10/14/1991**

3a. Date of Last Report  
**05/01/1995**

2. Principal Place of Business

21 **8600 N.W. 53 TERRACE**

2a. Mailing Address

26 **8600 N.W. 53 TERRACE**

4. FEI Number  
**65-0288096**

Applied For  
Not Applicable

22 Suite, Apt. #, etc.

22 **202**

27 Suite, Apt. #, etc.

27 **SUITE 202**

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

23 City & State

23 **MIAMI, FL**

28 City & State

28 **MIAMI, FL**

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

24 Zip

24 **33166**

25 Country

25 **US**

29 Zip

29 **33166**

30 Country

30 **US**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**VILLENA, MARIO A  
7961 NW 14 STREET  
MIAMI FL 33126**

10. Name and Address of New Registered Agent

81 Name  
**ALEXANDER TELLEZ**

82 Street Address (P.O. Box Number is Not Acceptable)  
**8600 N.W. 53 TERRACE**

83 **SUITE 202**

84 City  
**MIAMI**

FL

85 Zip Code  
**33166**

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

*Alexander Tellez*

**ALEXANDER TELLEZ, CEO, PRES 2/13/96**

Signature, typed or printed name of registered agent and title if applicable

Signature, typed or printed name of registered agent and title if applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE **CEO** ☒ DELETE

NAME  
**VILLENA, MARIO A**  
STREET ADDRESS  
**960 NW 127 PLACE**  
CITY-STATE-ZIP  
**MIAMI FL**

TITLE **P** ☒ DELETE

NAME  
**VELLENA, JOSE A**  
STREET ADDRESS  
**8270 SW 47 TERRACE**  
CITY-STATE-ZIP  
**MIAMI FL**

TITLE **V** ☒ DELETE

NAME  
**BEN-CHANOCH, EYRAL**  
STREET ADDRESS  
**8255 LAKE DRIVE, #F-408**  
CITY-STATE-ZIP  
**MIAMI FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **CEO, P** ☐ Change ☒ Addition

1.2 NAME  
**ALEXANDER TELLEZ**  
1.3 STREET ADDRESS  
**9737 NW. 41 STREET #140**  
1.4 CITY-STATE-ZIP  
**MIAMI, FL 33178**

2.1 TITLE **V, S, T** ☐ Change ☒ Addition

2.2 NAME  
**MARIO VILLENA**  
2.3 STREET ADDRESS  
**960 N.W. 127 PLACE**  
2.4 CITY-STATE-ZIP  
**MIAMI, FL**

3.1 TITLE **V** ☐ Change ☒ Addition

3.2 NAME  
**VILLENA, JOSE**  
3.3 STREET ADDRESS  
**8270 S.W. 47 TERRACE**  
3.4 CITY-STATE-ZIP  
**MIAMI, FL**

4.1 TITLE **V** ☐ Change ☒ Addition

4.2 NAME  
**BEN-CHANOCH, EYRAL**  
4.3 STREET ADDRESS  
**8255 LAKE DRIVE, #F-408**  
4.4 CITY-STATE-ZIP  
**MIAMI, FL**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

*Alexander Tellez*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/13/96 (305)639-2255**

Date Daytime Phone #

CR2E034 (12/95)