

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006086

FILED
Jan 23, 2008
Secretary of State

Entity Name: DATATEL COMMUNICATIONS INC.

Current Principal Place of Business:

799 E. JEFFERY ST
#309
BOCA RATON, FL 33487

New Principal Place of Business:

15 JEFF DR
ASHEVILLE, NC 28806

Current Mailing Address:

8345 NW 66TH STREET
#7995
MIAMI, FL 33166

New Mailing Address:

FEI Number: 98-0192099 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEAF, MARALYN D PHILIP
100 S.E. 2ND STREET, #2330
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HOLAN, PHILIP P PHILIP
Address: 8345 NW 66TH STREET, #7995
City-St-Zip: MIAMI, FL 33166

Title: CEO () Delete
Name: CRESPI, BARNARD
Address: 1200 EGLINTON AVE. E, SUITE 712
City-St-Zip: TORONTO, ON M3C1H9 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILIP HOLAN

CEO

01/23/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date