

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90251 017 ***150.00

DOCUMENT # F98000001870

1. Entity Name
NEXTEL INTERNATIONAL (SERVICES), LTD., INC.

Principal Place of Business 1191 SECOND AVENUE, SUITE 1600 SEATTLE WA 98101	Mailing Address 1191 SECOND AVENUE, SUITE 1600 SEATTLE WA 98101-3439
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0000J204



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 10700 Parkridge Blvd Suite, Apt. #, etc. Ste 600 City & State Reston, VA Zip 20191 Country USA	3. Mailing Address 10700 Parkridge Blvd Suite, Apt. #, etc. Suite 600 City & State Reston, VA Zip 20191 Country USA
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4. FEI Number 91-1726566	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent
 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) 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	
TITLE - NAME PD GRINSTEIN, KEITH D	<input type="checkbox"/> Delete
STREET ADDRESS 1191 SECOND AVENUE, SUITE 1600	
CITY-ST-ZIP SEATTLE WA 98101	
TITLE - NAME VT SILIEZAR, BYRON	<input type="checkbox"/> Delete
STREET ADDRESS 1191 SECOND AVENUE, SUITE 1600	
CITY-ST-ZIP SEATTLE WA 98101	
TITLE - NAME DV VINCENT, BRIAN A	<input type="checkbox"/> Delete
STREET ADDRESS 1191 SECOND AVENUE, SUITE 1600	
CITY-ST-ZIP SEATTLE WA 98101	
TITLE - NAME VSD KIANG, HENG-PIN	<input type="checkbox"/> Delete
STREET ADDRESS 1191 SECOND AVENUE, SUITE 1600	
CITY-ST-ZIP SEATTLE WA 98101	
TITLE - NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	
TITLE - NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE - NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE - NAME VT SILIEZAR, BYRON	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 10700 PARKRIDGE BLVD, SUITE 600	
CITY-ST-ZIP RESTON, VA 20191	
TITLE - NAME DV VINCENT, BRIAN A	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 10700 PARKRIDGE BLVD, SUITE 600	
CITY-ST-ZIP RESTON, VA 20191	
TITLE - NAME VSD KIANG, HENG-PIN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 10700 PARKRIDGE BLVD, SUITE 600	
CITY-ST-ZIP RESTON, VA 20191	
TITLE - NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE - NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	

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: Juan T. Anubra **RECORDED** 1/6/00 703-3905174
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)