

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90158 049 ***550.00

DOCUMENT # P00000103011

1. Entity Name
IMAK WIRELESS NETWORKS, INC.

Principal Place of Business 33 E ROBINSON ST SUITE 103 ORLANDO FL 32801	Mailing Address 33 E ROBINSON ST SUITE 103 ORLANDO FL 32801
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2. Principal Place of Business <i>Same</i>	3. Mailing Address <i>1216 Mercedes place</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <i>Orlando FL</i>	4. FEI Number <i>59-3657565</i>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
Zip <i>32804</i>	Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**FRONCZEK, JOSEPH P
 33 E ROBINSON ST SUITE 103
 ORLANDO FL 32801**

7. Name and Address of New Registered Agent
 Name *Joseph P Fronczek*
 Street Address (P.O. Box Number is Not Acceptable)
1216 Mercedes place
 City *Orlando* **FL** Zip Code *32804*

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 *Joseph P Fronczek* DATE *9-5-01*
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$550.00 After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D FRONCZEK, JOSEPH P 12 ALDEN AVE AUBURN NY 13021	<input type="checkbox"/>		<input type="checkbox"/>
D FRONCZEK, CASEY A 1216 MERCEDES PL ORLANDO FL 32804	<input type="checkbox"/>		<input type="checkbox"/>
D MAHONEY, STEWART 33 E ROBINSON ST SUITE 103 ORLANDO FL 32801	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

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: *Joseph P Fronczek* **SIGNATURE REQUIRED** DATE: *9-5-01* DAYTIME PHONE #: *(315) 730-1333*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (5/01)