FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 20 PM 3:22

DOCUMENT # **P12884** **(3)**

1. Corporation Name
NOKIA MOBILE PHONES INC.

Principal Place of Business	Mailing Address
2300 TALL PINES DRIVE 120 LARGO FL 34641 US	2300 TALL PINES DRIVE SUITE 100 LARGO FL 34641

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/14/1987
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 6200 COURTNEY CAMPBELL CAUSEWAY
Suite, Apt. #, etc.
22 SUITE 900
City & State
23 TAMPA FL
Zip 24 33607 Country 25

2a. Mailing Address
26 P. O. BOX 30730
Suite, Apt. #, etc.
27
City & State
28 TAMPA, FL
Zip 29 33630-3730 Country 30

4. FEI Number: 59-2763656 ☐ Applied For ☐ Not Applicable

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

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

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

9. Name and Address of Current Registered Agent

PTH
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	11 TITLE	CD	☒ Change ☐ Addition
NAME	OLLILA, JORMA	12 NAME	PEKKA ALA-PIETILÄ	
STREET ADDRESS	NAKOLANKATU 8	13 STREET ADDRESS	METSÄNNEIDONKUJA 6, PL 47	
CITY ST ZIP	SALO, FINLAND	14 CITY ST ZIP	FIN-02131 ESPOO	
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	WILSKA, KARI-PEKKA	22 NAME		
STREET ADDRESS	2300 VALLEY VIEW LANE, SUITE 100	23 STREET ADDRESS		
CITY ST ZIP	IRVING T	24 CITY ST ZIP		
TITLE	S	31 TITLE		☒ Change ☐ Addition
NAME	NORMAN, GENE	32 NAME		
STREET ADDRESS	2300 TALL PINES DRIVE, SUITE 120	33 STREET ADDRESS	6200 COURTNEY CAMPBELL CAUSEWAY, SUITE 900	
CITY ST ZIP	LARGO FL	34 CITY ST ZIP	TAMPA, FL 33607	
TITLE	T	41 TITLE		☒ Change ☐ Addition
NAME	TERAS, ILKKA	42 NAME		
STREET ADDRESS	12332 CAPRI CR NORTH	43 STREET ADDRESS	6200 COURTNEY CAMPBELL CAUSEWAY, SUITE 900	
CITY ST ZIP	TREASURE ISLAND FL	44 CITY ST ZIP	TAMPA, FL 33607	
TITLE	PD	51 TITLE		☒ Change ☐ Addition
NAME	CHELLGREN, PAUL	52 NAME		
STREET ADDRESS	450 LISA LANE	53 STREET ADDRESS	6200 COURTNEY CAMPBELL CAUSEWAY, SUITE 900	
CITY ST ZIP	OLDSMAR FL	54 CITY ST ZIP	TAMPA, FL 33607	
TITLE		61 TITLE	D	☐ Change ☒ Addition
NAME		62 NAME	THOMAS SILDIGER	
STREET ADDRESS		63 STREET ADDRESS	430 PARK AVE.	
CITY ST ZIP		64 CITY ST ZIP	NEW YORK, NY 10022-3592	

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)(i), 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: _____ ILKKA A TERAS 3/17/95 813-288-3800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0382067 CP