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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # P94000081327 (6)

1. Corporation Name
~~FLORIDA TELECARD & TELECOM, INC.~~
FT&T WIRELESS 1 LLC

Principal Place of Business
~~3908 PAPAYA ST~~ 714 PINE ISLAND ROAD
~~ST JAMES CITY FL 33956~~ CAPE CORAL FL 33991
US

Mailing Address
~~3908 PAPAYA STREET ST~~ SAME
~~ST JAMES CITY FL 33956~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 714 PINE ISLAND ROAD	2a. Mailing Address 26 714 PINE ISLAND ROAD	3. Date Incorporated or Qualified 11/04/1994	
Suite, Apt. #, etc. 22 CAPE CORAL FL	Suite, Apt. #, etc. 27 CAPE CORAL FL	4. FEI Number 65-0563478	☐ Applied For ☐ Not Applicable
City & State 23 33991	City & State 28 33991	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Zip / Country 24 / 25 USA	Zip / Country 29 / 30 USA	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

BECKTA, BARRY M
3908 PAPAYA STREET
ST JAMES CITY FL 33956

10. Name and Address of New Registered Agent

81 Name: BARRY M. BECKTA
82 Street Address (P.O. Box Number Is Not Acceptable): 714 PINE ISLAND ROAD
83 CAPE CORAL FL 33991
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: [signature] PRESIDENT — 1/21/98
Signature of typed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PRESIDENT BECKTA, BARRY M 3908 PAPAYA ST ST JAMES CITY FL 33956	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VICE PRES PEARCE, GARY 1085 S LAKE AVE ST CLOUD FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/97)

14. 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 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: [signature] PRESIDENT — 1/21/98 — 941-573-1663
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Daytime Phone #