| CO | E NOW: FILING FEE A | FLORIDA DEPA | RTMENT OF STATE B. Mortham | FILE | |
|-------------------------------|---|--|--|--|---|
| | 1998 | Secretary of State DIVISION OF CORPORATIONS | | 00 1111 10 | M 10. EQ |
| DOCU | | · · · · · · · · · · · · · · · · · · · | <u></u> | - 98 JUN 19 1 | |
| 1. Corporatio | MENT #201511-70 | | SECRETARY TALLAHASSEE | OF STATE | |
| | MobileComm of Florid | la, Inc. | | IALLANASSE | |
| Principal Plac | ce of Business | Mailing Address Sar | no | | |
| | One Executive Drive, | | | | |
| | Fort Lee, NJ 07024 | | | DO NOT WRITE IN | |
| | | | | Date Incorporated or Qualified 8/31/65 | |
| 2. Principal F | Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 Suite, Apt. | # oto | 26 Suite, Apt, #, etc. | | 59-1197602 | Not Applicable |
| 22 | . π, φισ. | 27 | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & Sta | le | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 Zip | Country | 28 Zip | Country | Trust Fund Contribution L. 8. This corporation owes or has paid the second secon | |
| 24 | 25 | 29 | 30 | Personal Property Tax due June 30. | X Yes No |
| | 9. Name and Address of Current | Registered Agent | 81 Name | 10. Name and Address of New Regist | ered Agent |
| Corro | ration Service Compan | 17 | 82 Street Add | Iress (P.O. Box Number is Not Acceptable) | |
| | Hays Street | 'y | | | |
| Tallał | ha ss ee, FL 32301 | | 83 | | |
| | | | 84 City | | FL 85 Zip Code |
| office or | t to the provisions of Sections 607.0502 regi ste red agent, or both, in the State c am f a miliar with, and accept the obligat | of Florida, Such change was | authorized by the corpora | poration submits this statement for the purp tion's board of directors. I hereby accept the | ose of changing its registered e appointment as registered |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if applicable (NO | It : Registered Agent signature requ | ired when reinstating) D | ATC |
| 12. | OFFICERS AND | DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS | > |
| TITLE NAME | Director Joseph A, Bondi | DELETE | 1.1 TITLE 12 NAME | | Change 🛄 Addition 😫 |
| STREET ADDRESS | | . Suite 500 | 1.3 STREET ADDRESS | | 034 |
| CITY-ST-ZIP | Fort Lee, NJ 07024 | | 1.4 CITY-ST-ZIP | | Chance Addilion |
| TITLE | Chairman-Restructur | ing DELITE | 21 TILE | | L Change L Addition O |
| NAME STREET ADDRESS | Joseph A, Bondi | Suito 500 | 2.2 NAME 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | One Executive Brive Fort Lee, NJ 87024 | | 2. 4 CITY - ST - ZIP | | |
| TITLE | President & CEO Ronald R. Grawert | DELETE | 3.1 TIPLE | | Change Addition |
| NAME STREET ADDRESS | One Executive Drive | . Suite 500 | 3.2 NAME 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | Fort Lee, NJ 07024 | | 3.4 CITY-ST-ZIP | | |
| TUTLE | Sr. VP & CFO | DELFTE | 4.1 TATLE | | Change Addition |
| NAME STREET ADDRESS | David R. Gibson One Executive Drive | Suite 500 | 4. 2 NAME 4.3 STREET ADDRESS | | |
| CITY - ST-ZIP | Fort Lee, NJ 07024 | | 4.4 CITY - S1- ZIP | | |
| TITLE | Vice President & Sec | cretary DELFIE | 5.1 TITLE | | Change Addition |
| NAME STREET ADDRESS | Patricia A. Gray | | 5.2 NAME 5.3 STREET ADDRESS | | |
| STREET ADDRESS CITY-ST-ZIP | One Executive Drive Fort Lee, NJ 07024 | | 5.4 CITY-ST-ZIP | | 11757 |
| TITLE | Treasurer | DELETE | 6 1 THILE | | Chauge Addition |
| | James M. Pascucci | | 6.2 NAME | ~ | |
| STREET ADDRESS | One Executive Drive | , Suite 500 🐇 | 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP | 2000/4/53 | 03-8 |
| 14. I hereby indicated | centry hat the information supplied will on this annual report or supplied will | this filing does not qualify f annual report is true and acc | or the exemption stated in curate and that my signate | Section 119.07(3)(i), Florida Statutes. I furth are shall have the same legal effect as if mar puired by Chapter 607, Florida Statutes; and | er certify that the information de under oath: that I am an |
| officer or Block 12 | director of the corporation or the receip or Block 13 if changed, of onkin attact | ver or trustee empowered to nment with an address | execute this report as req | uired by Chapter 607, Florida Statutes; and | that my name appears in |
| | Patricia A. G | ray / VP & Secre | tary | 6/1/98 M | 234-9200 |

MobileComm

One Executive Drive Suite 500 Fort Lee, NJ 07024 Telephone: 201/224 9200 Fax: 201/969 4500



June 11, 1998



Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re: MobileComm of Florida, Inc.

To Whom It Concerns:

Enclosed please find an annual report for filing on behalf of the above referenced company along with the \$150.00 filing fee. Per the instruction of one of the state's representatives, I have not enclosed the late filing fee because the company's mailing address has changed and the forms were never received.

The new address is:

One Executive Drive, Suite 500 Fort Lee, NJ 07024

Please return a date stamped copy of the filing to my attention in the enclosed envelope.

If you have any questions or need additional information, please feel free to contact me at (201) 224-9200 extension 3950.

Very truly yours,

Coleen Capaz Associate Paralegal

cc: P. Gray R. Newman D. Wilson

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| (<u>C O M P A N Y</u> | ACCOUNT NO. : 072100000032 REFERENCE : 861006 5045907 AUTHORIZATION : Patricia Pagint COST LIMIT : \$ 150.00 |
|------------------------|---|
| | : June 18, 1998 : 11:18 AM |
| | : 861006-015 D: 5045907 |
| CUSTOMER : | Mobilecomm One Executive Drive Suite 500 Fort Lee, NJ 07024 |
| | 3000025653038 |

NAME: MOBILECOMM OF FLORIDA, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

| | CERTIFIED COPY |
|-----------|------------------------------|
| <u>XX</u> | PLAIN STAMPED COPY |
| | CERTIFICATE OF GOOD STANDING |

CONTACT PERSON: Lignette Coleman

RECEIVED 93 JUN 19 AH 10: 40 DIVISION OF CORPORATION

EXAMINER'S INITIALS: