

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 408202

1. Entity Name

AREAWIDE CELLULAR, INC.

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90046 007 ***150.00

Principal Place of Business

Mailing Address

1040 SOUTH MILWAUKEE AVENUE
WHEELING IL 60090
US

1040 SOUTH MILWAUKEE AVENUE
WHEELING IL 60090-6373
US

2. Principal Place of Business

3. Mailing Address

1615 Barclay Blvd.

1615 Barclay Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Buffalo Grove, IL

City & State

Buffalo Grove, IL

Zip

60089

Country

US

Zip

60089

Country

US

4. FEI Number

65-0183747

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERNSTEIN, JOEL
11900 BISCAYNE BLVD.
SUITE 604
MIAMI FL 33181

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

[Signature]
Signature, typed or printed name of registered agent and title if applicable.
(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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	☒ Delete
NAME	HUDACK, ALAN	
STREET ADDRESS	1040 SOUTH MILWAUKEE AVENUE	
CITY-ST-ZIP	WHEELING IL 60090	
TITLE	T	☐ Delete
NAME	ZEBEL, STEVE	
STREET ADDRESS	1040 SOUTH MILWAUKEE AVENUE	
CITY-ST-ZIP	WHEELING IL 60090	
TITLE	S	☐ Delete
NAME	JACOBS, DARYL	
STREET ADDRESS	1040 SOUTH MILWAUKEE AVENUE	
CITY-ST-ZIP	WHEELING IL 60090	
TITLE	D	☐ Delete
NAME	BEGAHLER, DONALD B	
STREET ADDRESS	805 3RD AVENUE	
CITY-ST-ZIP	NEW YORK NY 10022	
TITLE	D	☐ Delete
NAME	TYRIE, DAVID	
STREET ADDRESS	1040 SOUTH MILWAUKEE AVENUE	
CITY-ST-ZIP	WHEELING IL 60090	
TITLE	D	☐ Delete
NAME	RYAN, NANCY	
STREET ADDRESS	1040 SOUTH WILWAUKEE AVENUE	
CITY-ST-ZIP	WHEELING IL 60090	

TITLE	P	☐ Change ☒ Addition
NAME	Hirt, Fred	
STREET ADDRESS	220 W San Marino Dr	
CITY-ST-ZIP	Miami Beach FL 33139	
TITLE	T	☒ Change ☐ Addition
NAME	Zabel, Steven	
STREET ADDRESS	1615 Barclay Blvd.	
CITY-ST-ZIP	Buffalo Grove, IL	
TITLE	S	☒ Change ☐ Addition
NAME	Jacobs, Darryl P.	
STREET ADDRESS	1615 Barclay Blvd.	
CITY-ST-ZIP	Buffalo Grove, IL 60089	
TITLE	D	☒ Change ☐ Addition
NAME	Beahler, Donald B.	
STREET ADDRESS	805 3rd Avenue	
CITY-ST-ZIP	New York, NY 10022	
TITLE	D	☒ Change ☐ Addition
NAME	Tyrie, David	
STREET ADDRESS	10800 Biscayne Blvd 10th Floor	
CITY-ST-ZIP	Miami, FL 33161	
TITLE	D	☒ Change ☐ Addition
NAME	Ryan, Nancy	
STREET ADDRESS	10800 Biscayne Blvd 10th Floor	
CITY-ST-ZIP	Miami, FL 33161	

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 an other like empowered.

SIGNATURE

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Darryl P. Jacobs, 3/28/00

Date

Daytime Phone #

847 353 7015

CR2E034 (9/99)