

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A99000001985**

1. Entity Name

WPOI OF SAN FRANCISCO WIRELESS PARTNERS, L.L.P.

FILED

01 OCT - 2 PM 12:17

Principal Place of Business

**11000 PROSPERITY FARMS ROAD, SUITE 201
PALM BEACH GARDENS FL 33410**

Mailing Address

**11000 PROSPERITY FARMS ROAD, SUITE 201
PALM BEACH GARDENS FL 33410**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY SEPTEMBER 26, 2001

City & State

City & State

4. FEI Number **65-0964482** **APPLIED FOR**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$1,000.00

10. Amount of Capital Contributions in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT #
NAME **CHEN, SHIRLEY P**
STREET ADDRESS **3412 HACKNEY COURT**
CITY-ST-ZIP **RALEIGH NC 97613**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME **CHIN, ACHSON**
STREET ADDRESS **1 HONEY COURT**
CITY-ST-ZIP **METUCHEN NJ 08840**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME **DOMM, GEORGE W**
STREET ADDRESS **946 RODNEY DRIVE**
CITY-ST-ZIP **SAN LEANDRO CA 94577**

STREET ADDRESS

CITY-ST-ZIP

2000004622792-0
-10/04/01--01020--002
******541.25 ****526.25**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: **S. Achson** **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

9/21/01

212 657-7184

CR2E003 (5/01)