

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2003 8:00 am
Secretary of State

07-16-2003 90039 019 ***150.00

0139560 AT

DOCUMENT # F01000005411

1. Entity Name

ACTICOM WIRELESS COMMUNICATIONS INC.



Principal Place of Business
**12459 TAMiami TRAIL
PUNTA GORDA FL 33955**

Mailing Address
**P.O. BOX 512711
PUNTA GORDA FL 33951-2711**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0965353

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FIORINI, SUSAN L
12459 TAMiami TRAIL
PUNTA GORDA FL 33955**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Susan L. Fiorini

Susan L. Fiorini

7/10/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P FIORINI, JOSEPH E
12459 TAMiami TRAIL
PUNTA GORDA FL 33955** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VST FIORINI, SUSAN L
12459 TAMiami TRAIL
PUNTA GORDA FL 33955** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Susan L. Fiorini

7/10/03

941-575-8609

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment #

90143382



ACTICOM WIRELESS
COMMUNICATIONS, INC.

Specialists in Radio Communications

10 July, 2003

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee FL 32302-1500

RE: Document #FO1000005411

To Whom it May concern,

This is the first notice we received for the Uniform Business Report Filing. We are enclosing the \$150.00 filing fee per the instructions on the back page.

Very truly yours,

Susan L. Fiorini
Vice President
Acticom Wireless Communications, Inc.

cc: file