

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000001949 (6)

1. Corporation Name

SABER COMMUNICATIONS, INC.



Principal Place of Business 1109 N. BELTUNE HWY. MOBILE AL 00 US	Mailing Address New address: c/o NEXTEL COMMUNICATIONS, INC. 1505 Farm Credit Drive McLean, VA 22102 Attn: Tax Dept.
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 04/14/1994 3a. Date of Last Report 02/07/1996 4. FEI Number 63-1114447 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD NAME MCAULEY, BRIAN D STREET ADDRESS 201 ROUTE 17 NORTH CITY-ST-ZIP RUTHERFORD NJ 07070 <input checked="" type="checkbox"/> DELETE	1.1 TITLE CEO/DIRECTOR 1.2 NAME DANIEL F. AKERSON 1.3 STREET ADDRESS c/o NEXTEL COMMUNICATIONS, INC. 1.4 CITY-ST-ZIP 1505 Farm Credit Drive McLean, VA 22102 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD NAME O'BRIEN, MORGAN E STREET ADDRESS 200 CONNECTICUT AVENUE NW SUITE 1001 CITY-ST-ZIP WASHINGTON DC 20008 <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE AST NAME VELE, JOHN A STREET ADDRESS 201 ROUTE 17 NORTH CITY-ST-ZIP RUTHERFORD NJ 07070 <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME PESCATORE, JOHN STREET ADDRESS 201 ROUTE 17 NORTH CITY-ST-ZIP RUTHERFORD NJ <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME SIDMAN, THOMAS STREET ADDRESS 201 ROUTE 17 NORTH CITY-ST-ZIP RUTHERFORD NJ <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE AVP NAME WILLMOTH, JOHN STREET ADDRESS 201 ROUTE 17 NORTH CITY-ST-ZIP RUTHERFORD NJ <input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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.

CR2E034 (9/96)