2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 12, 2001 8:00 am DOCUMENT # F9500001002 **Secretary of State** WINSTAR WIRELESS OF FLORIDA, INC. 03-12-2001 90498 013 ***150.00 Principal Place of Business Mailing Address 1577 SPRINGHILL RD 1577 SPRINGHILL RD 6TH FLOOR 6TH FL UUU24588 VIENNA VA 22182 VIENNA VA 22182 lis 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 13-3903568 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HIQ CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 EAST PARK AVENUE STE 200 TALLAHASSEE FL 32301 City Zip Code FL 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE MCLERMON, STEVE NAME NAME 1577 SPRINGHILL RD, 6TH FLOOR STREET ADDRESS STREET ADDRES NIENNA VA 22182 CITY-ST-ZIP CITY-ST-7IP TITLE TITLE ☐ Delete THIRD AVENUE, 12 TH FLOOR MOORE, DANIEL NAME NAME STREET ADDRESS 230 PARK AVE #2700 STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10169** CITY-ST-7IP TITLE -Délete TITLE: TIMOTHY GRAHAM NAME NAME 685 THIRD AVENUE, 12 TH 230 PARK AVENUE, #2700 STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NY NY 10169 NEW YORK, NY 100 17 Change **X** Addition TITLE ☑ Delete TITLE DWYER, JOSEPH UHL S RICHARD 685 THIRD AVENUE, 12 NAME NAME 230 PARK AVENUE, #2700 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10169** NEW YORK DY 10017 Change Addition TITLE ☐ Delete TITLE RUBIN, FREDERICK NAME NAME 685 THIRD AVENUE, 12 TH 230 PARK AVE #2700 STREET ADDRESS STREET ADDRESS **NEW YORK NY 10169** CITY-ST-ZIP CITY-ST-ZIP NEW YORK, NY 10017 Addition TITLE Delete TITLE Change ZINGHINI, KENNETH NAME NAME 230 PARK AVENUE, #2700 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10169** CITY-ST-ZIP

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 all other like empowered. SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO