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PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # F9500001185

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90157 050 ***150.00

NATIONAL WIRELESS HOLDINGS INC. Mailing Address Principal Place of Business SUITE 301 SUITE 301 249 ROYAL PALM WAY 249 ROYAL PALM WAY DO NOT WRITE IN THIS SPACE PALM BEACH FL 33480 PALM BEACH FL 33480 3. Date Incorporated or Qualifed 03/13/1995 4 FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 13-3735316 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 23 28 Country Country Zip 8. This corporation owes the current year Intangible Zip Personal Property Tax. 25 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM. INC. 82 Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301 83 Zip Code 84 85 City 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) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE ☐ Change ☐ Addition 1.1 TITLE TITLE 1.2 NAME CASSIDY, TERRENCE S NAME 1.3 STREET ADDRESS 249 ROYAL PALM WAY, SUITE 301 STREET ADDRESS PALM BEACH FL 33480 1.4 CITY-ST-ZIP CITY-ST-ZIP [] Change ☐ Addition DELETE 2.1 TITLE TITLE SINDERBRAND, PAUL J 2.2 NAME NAME 2.3 STREET ADDRESS 888 16TH STREET NW STREET ADDRESS WASHINGTON DC 20006 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 3.1 TITLE TITI F 3.2 NAME KARDON, JAMES NAME 3.3 STREET ADDRESS 350 FIFTH AVENUE STREET ADDRESS **NEW YORK NY 10118** 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 4.1 TITLE TITLE 4.2 NAME NAME MATHEWS, TIMOTHY 233 GARRARD DRIVE 4.3 STREET ADDRESS STREET ADDRESS **RANTOUL IL 61866** 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 5.1 TITLE TITLE 52 NAME SPECCHIO, MICHAEL J 5.3 STREET ADDRESS 233 GARRARD DRIVE STREET ADDRESS 5.4 CITY-ST-ZIP RANTOUL IL 61866 CITY-ST-ZIP Change ☐ Addition ☐ DELETE 6.1 TITLE TITLE 6.2 NAME NAME MCMANUS, MICHAEL JR 6.3 STREET ADDRESS STREET ADDRESS 241-02 NORTHERN BOULEVARD 6.4 CITY-ST-ZIP

14. Thereby 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, with all other like empowered.

SIGNATURE: Y Least Qu

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