

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000005289 (2)

1. Corporation Name

U S WEST PCS HOLDINGS, INC.



Principal Place of Business

Mailing Address

7800 EAST ORCHARD ROAD, SUITE 480
ENGLEWOOD CO 80111

7800 EAST ORCHARD ROAD, SUITE 480
ENGLEWOOD CO 80111

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt #, etc

Suite, Apt #, etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and official appointing

(NOTE: Registered Agent signature required when reappointing)

Date

12. OFFICERS AND DIRECTORS

TITLE DPT
NAME LILLIS, CHARLES M
STREET ADDRESS 7800 EAST ORCHARD ROAD, SUITE 200
CITY-ST-ZIP ENGLEWOOD CO 80111

TITLE S
NAME ROELLIG, MARK D
STREET ADDRESS 7800 EAST ORCHARD ROAD, SUITE 480
CITY-ST-ZIP ENGLEWOOD CO 80111

TITLE AS
NAME CHANEY, TERRY K
STREET ADDRESS 7800 EAST ORCHARD ROAD, SUITE 480
CITY-ST-ZIP ENGLEWOOD CO 80111

TITLE AS
NAME HIJAR, GLENDA M
STREET ADDRESS 7800 EAST ORCHARD ROAD, SUITE 480
CITY-ST-ZIP ENGLEWOOD CO 80111

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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***225.00

SIGNATURE:

Glenda M. Hajar

Glenda M. Hajar

7/11/96 (303) 792-4900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

By/for Florida

CR2E034 (3/96)