2001 UNIFORM BUSINESS REPORT (UBR)

Apr 26, 2001 8:00 am Secretary of State DOCUMENT # F95000005532 1. Entity Name NYNEX PCS INC. 4-26-2001 90328 004 ***150.00 Principal Place of Business Mailing Address 1095 AVENUE OF THE AMERICAS 1717 ARCH ST NEW YORK NY 10036 15TH FL ~~~~~~~~~ US PHILADELPHIA FL 19103 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 13-3762382 Not Applicable Zip Country 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 C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) STAC FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Additine KELLY, PAUL N NAME NAME 1717 ARCH ST., 15TH FL STREET ADDRESS STREET ADDRESS CITY-ST-7IP PHILADELPHIA FL 19103 CITY - S1 - ZIP PCOD TITLE **⊠** Delete TITLE COB/P/CEO/D Change X Addition STRIGL, DENNIS F NAME LAWIZENCE T. BADDIO, JR. STREET ADORESS 180 WASHINGTON VALLEY RD 1095 Avenue of the Americas STREET ADDRESS CITY-ST-7IP BEDMINSTER NJ 07921 CITY-ST-ZIP New YORK, NY 10036 TITLE Change ☐ Delete Addition RIDGE, GARY C NAME NAME 1717 ARCH ST., 29TH FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PHILADELPHIA PA 19103 CITY-S"-7IP TITLE ☐ Delete Change Addition GARRITY, JANET M MAME NAME STREET ADDRESS 3900 WASHINGTON STREET STREE1 ADDRESS CITY-ST-ZIP **WILMINGTON DE 19802** CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition MURPHY, DERMOTT O NAME NAME STREET ADDRESS 1717 ARCH ST., 29TH FL STREET ADDRESS CITY-ST-7P PHILADELPHIA PA 19103 CITY - ST - ZIP VAS TITLE ☐ Delete TITLE VASD Change Addition HEIMANN, STEPHEN B NAME STREET ADDRESS 1717 ARCH ST 32ND FL STREET ADDRESS CITY-ST-7IP

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

CITY-ST-ZIP

SIGNATURE:

PHILADELPHIA PA 19103

SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTO

FILED

CR2E034 (10/00)