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Apr 01 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F96000002799 (2)

1. Corporation Name

PHOENIX WIRELESS GROUP OF DELAWARE, INC.

Principal Place of Business

2300 MAITLAND CENTER PKWY. STE 200  
MAITLAND FL 32751

Mailing Address

2300 MAITLAND CENTER PKWY. STE 200  
MAITLAND FL 32751-7411



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

06/04/1996

3a. Date of Last Report

4. FEI Number

59-338 0852

☒ Applied For  
☒ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

UNITED CORPORATE SERVICES, INC.  
801 N.E. 167TH STREET, STE 300  
NORTH MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	LICURSI, RICHARD	
STREET ADDRESS	2300 MAITLAND CENTER PKWY., STE 200	
CITY-ST-ZIP	MAITLAND FL	
TITLE	VST	<input type="checkbox"/> DELETE
NAME	DEGRAVINA, NICHOLAS	
STREET ADDRESS	2300 MAITLAND CENTER PKWY., STE 200	
CITY-ST-ZIP	MAITLAND FL	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	BROSKOWITZ, BARRY	
STREET ADDRESS	2300 MAITLAND CENTER PKWY., STE 200	
CITY-ST-ZIP	MAITLAND FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	ANDREW, BRIAN J	
STREET ADDRESS	2300 MAITLAND CENTER PKWY., STE 200	
CITY-ST-ZIP	MAITLAND FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BECKLEY, RICHARD	
STREET ADDRESS	2300 MAITLAND CENTER PKWY., STE 200	
CITY-ST-ZIP	MAITLAND FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	STANFORTH, PETER	
STREET ADDRESS	2300 MAITLAND CENTER PKWY., STE 200	
CITY-ST-ZIP	MAITLAND FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	EXEC VICE PRES DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	PAUL MUELLER	
1.3 STREET ADDRESS	2300 MAITLAND CENT PKWY SUITE 200	
1.4 CITY-ST-ZIP	MAITLAND, FLORIDA	
2.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	MARK KINGTON	
2.3 STREET ADDRESS	2300 MAITLAND CENT PKWY SUITE 200	
2.4 CITY-ST-ZIP	MAITLAND FLORIDA	
3.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	RICHARD FRISBIE	
3.3 STREET ADDRESS	2300 MAITLAND CENT PKY SUITE 200	
3.4 CITY-ST-ZIP	MAITLAND, FLORIDA	
4.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	PHILIP HERGET	
4.3 STREET ADDRESS	2300 MAITLAND CENT PKWY SUITE 200	
4.4 CITY-ST-ZIP	MAITLAND, FLORIDA	
5.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	ALEXANDER SLUSKY	
5.3 STREET ADDRESS	2300 MAITLAND CENT PKWY SUITE 200	
5.4 CITY-ST-ZIP	MAITLAND, FLORIDA	
6.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	JAMES HYNES	
6.3 STREET ADDRESS	2300 MAITLAND CENT PKWY SUITE 200	
6.4 CITY-ST-ZIP	MAITLAND FLORIDA	

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NICHOLAS DEGRAVINA 3/27/97 407 667-1100

CR2E034 (9/96)