

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000001870

1. Entity Name
NEXTEL INTERNATIONAL (SERVICES), LTD., INC.

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90148 007 ***150.00

Principal Place of Business
10700 PARKRIDGE BLVD
STE 600
RESTON VA 20191

Mailing Address
10700 PARKRIDGE BLVD
STE 600
RESTON VA 20191



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 91-1726566

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

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

City

FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME GRINSTEIN, KEITH D
STREET ADDRESS 1191 SECOND AVENUE, SUITE 1600
CITY-ST-ZIP SEATTLE WA 98101 ☒ Delete

TITLE SEC.
NAME MERCEDES M. BARRERAS
STREET ADDRESS 10700 PARKRIDGE BLVD, SUITE 600
CITY-ST-ZIP RESTON, VA 20191 ☐ Change ☒ Addition

TITLE VP & TREASURER
NAME SILIEZAR, BYRON
STREET ADDRESS 10700 PARKRIDGE BLVD, SUITE 600
CITY-ST-ZIP RESTON VA 20191 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DV
NAME VINCENT, BRIAN A
STREET ADDRESS 10700 PARKRIDGE BLVD SUITE 600
CITY-ST-ZIP RESTON VA 20191 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VSD
NAME KIANG, HENG-PIN
STREET ADDRESS 10700 PARKRIDGE BLVD SUITE 600
CITY-ST-ZIP RESTON VA 20191 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DIR
NAME LO VAN GEMERT
STREET ADDRESS 10700 PARKRIDGE BLVD, SUITE 600
CITY-ST-ZIP RESTON, VA 20191 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME ROBERT J. GILKER
STREET ADDRESS 10700 PARKRIDGE BLVD, SUITE 600
CITY-ST-ZIP RESTON, VA 20191 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 DIRECTOR

MERCEDES M. BARRERAS

4-16-01 (703) 433-4000

Date

Daytime Phone #

CR2E034 (10/00)