FROM :

PHONE NO. :

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90443 048 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K00228L

1. Entity Name

The Mobile Phone Company, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5030 Champion Blvd
Suite, Apt. #, etc.
Suite 610
City & State
Boca Raton FL
Zip 33496 County

3. Mailing Address
5030 Champion Blvd
Suite, Apt. #, etc.
610
City & State
Boca Raton FL
Zip 33496 County

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0008939
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Edwin Altamirano

Street Address (P.O. Box Number is Not Acceptable): 5030 Champion Blvd Suite 610

City: Boca Raton FL Zip Code: 33496

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: Ed Altam Edwin Altamirano 4/15/02

Signature, typed or printed name of registered agent and title if applicable — (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) ☐

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

9. OFFICERS AND DIRECTORS

TITLE	CEO
NAME	Edwin Altamirano
STREET ADDRESS	5030 Champion Blvd
CITY-ST-ZIP	Suite 610 Boca Raton FL 33496
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Ed Altam Edwin Altamirano 4/15/02

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date