FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K72979

(3)

FLORIDA CELLULAR, INC.

FILED May 01 1997 8:00am Secretary of State

Principal Place 2275 6, FEDER DELRAY BEACH	IAL HWY., STE. 150	Mailing Address 2275 S. FEDERAL HWY S' DELRAY BEACH FL 33483-3			
		X		3. Date Incorporated or Qualified 03/15/1989	3a. Date of Last Report 02/14/1996
	lace of Business	2a. Mailing Address	COC ONV OF	4. FEI Number	Applied For
Suite, Apt	# ala	26 (4658 W#1 Suite, Apt #, etc.	ERS BAY CT.	65-0108744	Not Applicable
22	#, 0 [C.	1204		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	1	B. Election Campaign Financing	\$5.00 May Be
23		28 BOCA KOC	ton I-L	Trust Fund Contribution	Added to Fees
Zip 24	Country 25		Country 30 USA		Xyes ☐ No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New As	gistered Agent
FASTOV, FRANK 2275 SOUTH FEDERAL HWY DELRAY BEACH FL 33483				ess (P.O. Box Number is Not Acceptate	ole)
			84 City		FL 85 Zip Code
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was a	uthorized by the corporati	oration submits this statement for the pon's board of directors. I hereby acce	purpose of changing its registered
SIGNATURE	m lanimar with, and accept the obliga	illions of Section oor cools, Flor	iida Sialules.		
	Signature, typed or printed name of registered age		Hegistered Agent's gnature require		DATE
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	FASTOV, FRANK F	[Diffit	1.1 TITLE		L. Change . Addition
NAME STREET ADDRESS	19658 WATERS BAY CT., #12	04	1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33434	~ 1	1.4 CITY - ST - ZIP		
TITLE	V	DELETE	2.1 TITLE		Change Addition
NAME	FASTOV, RUTH		2.2 NAME		-
STREET ADDRESS	19658 WATERS BAY CT., #12	04	2 3 STREET ADDRESS		ĺ
CITY-ST-ZIP	BOCA RATON FL 33434		2 4 CITY-SI-ZIP		
TITLE		DELETE	3.1 THE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. C(1)Y - \$1 - Z(P		
TITLE		☐ DEFETE	4.1 THILE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDIRESS		
CITY-ST-ZIP		DELETE:	4.4 CHY-ST-ZIP		Change Addition
TITLE		□ miti	5 1 TITLE		El cusude El vadition
NAME CTREET ADDOCCC			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CHY-S1-7IP 61 TITLE		Change Addition
		□ bittir			C Grienge C Applicati
NAME PERSET ADDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADORESS		
CITY-ST-ZIP	ay cartifu that the information counties	d with this tiling doos not qualify	G4 CITY - ST- 2IP 1	in Section 119 07(3)(i) Florida Statute	os I further certify that the

4. 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 logal 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 or an appear of the corporation or the receiver of the corporation of t

OLOMATURE, X d

27,00

402-3118-2000