


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
FILED 97 FEB -4 PM 2:05 SECRETARY OF STATE TALLAHASSEE, FLORIDA		
FILING FEE \$ 203.75 Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE		
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L96000001284 SUNSHINE WIRELESS REALTY LIMITED LIABILITY COMPANY C/O SUNSHINE WIRELESS COMPANY 5200 NW 33RD AVE. STE 209 FORT LAUDERDALE FL 33309		1a. Principal Place of Business Address C/O SUNSHINE WIRELESS COMPANY 5200 NW 33RD AVE. STE 209 FORT LAUDERDALE FL 33309 <i>mwf</i>
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country
		3. Date Organized or Qualified 12/10/1996 3a. State of Formation FL
		4. FEI Number 65-0710042 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Date of Last Report N/A 6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>
7. Name and Address of Current Registered Agent WEIL, NORMAN I ESQ. 100 SE 2ND STREET MIAMI FL 33131		8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code FL
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.		
SIGNATURE _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>		
10. Title	Managing Members/Managers	Business Street Address
MGR	BERLANTI, DONALD V	320 PASEO DE PERALTA STE H SANTA FE NEW MEXICO
MGR	COHEN, DAN N	5200 NW 33RD AVE. STE 209 FORT LAUDERDALE FL
MGR	GREENHAWT, JEFFREY D	5200 NW 33RD AVE. STE 209 FORT LAUDERDALE FL
		100002073791--5 -02/06/97--01025--016 *****203.75 *****203.75
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.		
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small>		
<small>Date Daytime Phone #</small>		