FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Jan 22 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # M17948 (4)INTER CITY CELLULAR, INC. Principal Place of Business Mailing Address 13155 SW 87TH AVENUE 13155 SW 87TH AVENUE MIAMI FL 33176 MIAMI FL 33176 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/11/1985 Principal Place of Business 2a. Mailing Address FEi Number Applied For 13153 В <u>13153</u> 59-2552573 26 Not Applicable Suite. Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be m, αm 23 28 $\mathcal{N}_{I}\mathcal{C}_{I}\mathcal{N}_{I}$ Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Dade Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 PEREIRA, ERIC 13155 SW 87 AVE 82 MIAMI FL 33176 83 84 39°76 Micimi 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 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE ERIC Pereira, PEREIRA, ERIC NAME 1.2 NAME 5W 87 Avenue CR2E034 13153 13155 SW 87 AVE 1.3 STREET ADDRESS STREET ADDRESS Miami MIAMI FL 33176 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE A Change Addition TITLE 5,500gg NAME RUIZ, RICARDO M 2.2 NAME Aue 13153 13155 SW 87 AVE STREET ADDRESS 2.3 STREET ADDRESS 33176 MIAMI FL 33176 mam CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETTE Change Addition TITLE 51 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS 6,4 CITY-ST-2JP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

14. 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 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 on 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 305 DES TO (688