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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M39608

(8)

CELLULAR PHONE USA, INC.

FILED
May 18 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address						
301 N FEDER BOCA RATOR			301 N FEDERAL HWY BOCA RATON FL 33432			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						10/03/1986
	Place of Business	├ ¬	2a. Mailing Address			4, FEI Number Applied For
21	41.00	· · · · · · · · · · · · · · · · · · ·	26 Suite Act # etc			59-2740729 Not Applicable \$8.75 Additional
Suite, Apt.	#, 8tC.	F-7	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required
City & Stat	to.		City & State			Election Campaign Financing \$5.00 May Be
23		28	├ ¬ ′			Trust Fund Contribution Added to Fees
Zip				country		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Registered Agent
BIBI, JASON				81	Name	
	000 S FIELDBROOK CIRCLE		82 Street A		Street	Address (P.O. Box Number is Not Acceptable)
	CA RATON FL 33496					
				83		
				84	City	85 Zip Code
						FL 10 Ep cocc
11. Pursuant office or	to the provisions of Sections 607.	0502 and 607.1508, Flori da S i tate of Florida. Such ch ance v	tatutes, the was authori	above zed by	named the con	d corporation submits this statement for the purpose of changing its registered reporation'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						
40	Signature, typed or printed name of registers	d agent and title if applicable AND DIRECTORS	 	3.	nt signature	a required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PM	DELETE		1 TITLE		Change Addition
NAME	BIBI, JASON	- 0		2 NAME		
STREET ADDRESS	8395 DYNAGTY DR - /	8000 S. Field		Kies	ÀDESSA 1	li
CITY-ST-ZIP	BOCA RATON FL	3 co Poton I	<i>()</i> 1	4 CITY - ST	•	
TITLE			1 1071.8		Change Addition	
NAME		33452	2.3	2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	E		2.	2.4 CITY-ST-ZIP		
TITLE			3.1 TITLE		☐ Change ☐ Addition	
NAME	32		2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		address	
CITY-ST-ZIP			3.4. CITY-S		T-ZIP	
TITLE	DELETE 4.11		1 TITLE		Change Addition	
NAME	4.2		4.2 NAME			
STREET ADDRESS			4.3 STREFT ADDRESS		ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		T - ZIP	
TITLE	LE DELETE		5.	5.1 TITLE		ChangeAddition
NAME	NAME		. 5.7	. 5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP				5.4 CITY-ST-ZIP		
TITLE	DELETE 6.1		6.1 TITLE		Change Addition	
NAME	AME		6.3	6.2 NAME		
STREET ADDRESS	EET ADDRESS		6.3	6.3 STREET ADDRESS		
CITY-ST-ZIP	-ST-ZIP		6.	6.4 CITY - ST - ZIP		1
14. I hereby indicated	certify that the information supplied on this annual report or supplier.	ed with this filing does not qua iental annua l report is true ab c	any for the e	exemple and the	tion state at my sic	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information gnature shall have the same legal effect as if made under oath; that I am an
officer or director of the corporation of 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 changed, or on an attachment with an address.						

14/20/20 1561)29x.50