File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. SET - FILED THE FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 MAY 10 AT 10: 59 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE **\$** 188.75 Name and Mailing Address
of Limited Liability Company **DOCUMENT # M97000000599** 1a. Principal Place of Business Address EDWARDS AND KELCEY WIRELESS, L.L.C. 299 MADISON AVENUE 299 MADISON AVENUE MORRISTOWN NJ 07962 MORRISTOWN NJ 07962 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 09/15/1997 NJ Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 22-3417334 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Zib Country \$8.75 Additional Fee Required 04/17/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office O'CONNOR, MICHAEL 8406 BENJAMIN ROAD, SUITE F Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33534 Suite, Apt #, etc Zip Code 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 (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MCMAHON, KEVIN J MGR 299 MADISON AVENUE MORRISTOWN NJ MGR TANGEL, RICHARD E 299 MADISON AVENUE MORRISTOWN NJ 240002222632---05/18/99--01047--012 ****189-75 ****189,75 11. I do hereby certify that the information supplied with this filtre ploes 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 we 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 empowers to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNATURE MANAGING MEMPLY ON MANAGING

SIGNATURE:

INHSE10 R (12-98)