

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000031311

1. Entity Name
2BUY WIRELESS.COM INC.

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90068 020 ***150.00

Principal Place of Business

8281 NW 66TH ST
MIAMI FL 33183

Mailing Address

8281 NW 66TH ST
MIAMI FL 33183

2. Principal Place of Business

12030 SW 88th St.

3. Mailing Address

12030 SW 88th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami FL

City & State
Miami FL

4. FEI Number
65-1017190

☒ Applied For
☐ Not Applicable

Zip
33186

Country
Dade

Zip
33186

Country
Dade

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEWIS, NEAL R
TWO DATRAN CENTER, SUITE 1609
9130 S DADELAND BLVD
MIAMI FL 33156

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HWANG, MAO-SHENG
13745A SW 84TH ST
MIAMI FL 33183 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 report or supplemental 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mao-Sheng Hwang 5/1/2001 305 592 8148

Date

Daytime Phone #

CR2E034 (10/00)