

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90933 046 ***150.00

DOCUMENT # P00000060396

1. Entity Name
JUMPSTART WIRELESS CORPORATION

Principal Place of Business 702 LAKE SHORE DRIVE DELRAY BEACH FL 33444	Mailing Address 702 LAKE SHORE DRIVE DELRAY BEACH FL 33444
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546054



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 398 W. Camino Gardens Blvd.	3. Mailing Address 398 W. Camino Gardens Blvd.
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Suite, Apt. #, etc. Suite 204	Suite, Apt. #, etc. Suite 204
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City & State Boca Raton, FL	City & State Boca Raton, FL
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4. FEI Number 605-1024632	Applied For <input type="checkbox"/> Not Applicable
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Zip 33432	Country USA	Zip 33432	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BALDOVIN, SARAGA & LIPSHY, P.A. ATTENTION: ROBERT S. SARAGA, ESQ. 201 N.E. 1ST AVENUE DELRAY BEACH FL 33444	7. Name and Address of New Registered Agent Name Jeffrey Bonar Street Address (P.O. Box Number is Not Acceptable) 702 Lake Shore Drive City Delray Beach FL Zip Code 33444
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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: DATE: **4/27/2001**

Signature: Type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BONAR, JEFFREY 702 LAKE SHORE DRIVE DELRAY BEACH FL 33444 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Jeffrey Bonar 398 W. Camino Gardens Blvd., Ste. 204 Boca Raton, FL 33432 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John Olmstead 75 Spring Street, 4th Floor New York, NY 10012 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Edward Bohike 109 Peckham Lane Dorset, VT 05251 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: DATE: **4/27/2001** Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)