

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90354 005 ***150.00

DOCUMENT # P00000064675	
1. Entity Name MDX WIRELESS, INC.	

11036946

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 18408 Via Di Regina		3. Mailing Address 18408 Via Di Regina	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Boca Raton, FL		City & State Boca Raton, FL	
Zip 33496	Country USA	Zip 33496	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-2252276		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Alejo Valdez	
	Street Address (P.O. Box Number is Not Acceptable) 18408 Via Di Regina	
	City Boca Raton	FL Zip Code 33496

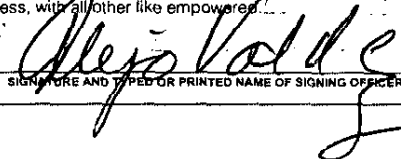
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE	NAME	TITLE	NAME
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP
FD	Alejo Valdez		
18408 Via Di Regina			
Boca Raton, FL 33496			
VP	Michele Valdez		
18408 Via Di Regina			
Boca Raton, FL 33496			
S	Nicol Valdez		
18408 Via Di Regina			
Boca Raton, FL 33496			
T	Natali Valdez		
18408 Via Di Regina			
Boca Raton, FL 33496			

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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: 	Alejo Valdez	561-305-4155
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #

CR2E034B (12/02)