200	2 UNIF	ORM BUS	INESS REPO	ort (ub	ir)	• •			A	1
DOCUMENT # P00000 10300 4									100	J
GOING WIRELESS INC.						FILED				
Principal Plai	ce of Business				02	APR 2	PM 5:	52		
								Y OF STA	*	
2. Principal Place of Business 3. Mailing Address 8204 CRYSTAL CLEAR LANE 7802 KINGS FOINTE PRI									1 11111 11111 11111 -	
Suite, Apt #, etc.			Suite, Apr. # erc. 205			O OO NOT WRITE'N THIS SPACE				
DRL	City & State ORLANDO FL		City & State OR LANDO	FI.	4. FEI Number 59 - 36			21550	<u> </u>	pplied For
322	819	Country	32-819	Country		5. Certificate of			\$8.75 Ac	lot Applicable Iditional
	6. Name ar	nd Address of Current							Fee Require	
6. Name and Address of Current Registered Agent Name Name Name Name										:
ł .			ROSEDS NO	Street	Address (P.C	D. Box Number is	Not Accep	ptable)		
j '	-		breeze da			30		5418		2
U	LLAND —	10 PL 3	2876	City		·		*300 .00		
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		5/0) 0	6)					V.	16-or	ļ
		nntaa name of registered agent a	nd the il applicable (NOTe	E. Registered Agent sign	alufe required wha	on reinstating)	···	DATE	0-02	
9. This corpo Tax filing i (See criter	II FEE IS \$150 02 Fee will be \$ le to Departmer	550.00		n Campaig und Contril	n Financing oution.	□ · \$5.0	00 May Be d to Fees			
11. TOTALE		OFFICERS AND E		12.		ADDITIONS/CH.	ANGES TO	OFFICERS AN	D DIRECTOR	S IN 11
HAME STREET ADDRESS CITY-ST-ZIP		-	☐ Delete	TITLE NAME STREET AODRESS CITY-ST-ZIP	9131 021	SOUTH	AAL) ERN	6000 E	⊠ Change ≥	Addition
TITLE NAME			☐ Delete	HTLE		71.130	<u>, , , , , , , , , , , , , , , , , , , </u>	:	☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP				NAME STREET ADDRESS CITY-ST-ZIP				*	•	
TOLE	!		☐ Delete	TITLE					Change	Addition
STREET ADDRESS CITY-ST-ZIP		e si		NAME 1 STREET ADORESS CITY-ST-ZIP	* -	· · · · · · · · ·		1.1	V V	
Title Name			☐ Delete	TITLE					Change	Addition
STREET ADDRESS City-ST-ZIP				NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME			Delete	TITLE NAME		****			☐ Change	Addition
STREET ADDRESS CITY - SY- ZIP				STREET ADDRESS						
ATLE -			vii □ Delete	THE " "			· •		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				NAME STREET ADDRESS CITY-S1-ZIP		•		· j . •		
13. Thereby 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 it made under oath; that I am an officer or director changed, or on an attackment with an address, with all other like empowered.										
SIGNATU		GNATURE AND TYPED OR PRIN	ITED NAME OF SIGNING OFFICER OF	RIDIRECTOR		4-	16_0 Date	2 (40)) 2 26_ 9 Sylline Phone #	1333

Zell

J.A.O. SERVICES INC.

7802 Kingspointe Parkway Suite 205 Orlando, FL 32819 (407) 226-9333

April 16, 2002

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Going Wireless Inc.

To whom it may concern:

Please be advised that we have now been retained as accountants for the client in question. We have been asked to write in their behalf.

Our client did not receive form UBR 2001 because his principal address was wrong. We advised them that the corporation had been dissolved for lack of filing the Annual report. Please find enclosed a check in the amount of \$300.00 for UBR 2001 and UBR 2002. Please reinstate this corporation at your earliest convenience and send any notices to our address as follows:

J.A.O. SERVICES INC. 7802 Kingspointe Parkway Suite 205 Orlando, FL 32819 (407) 226-9333

We appreciate the attention to this matter.

Sincerely

Jorge A. Ordinola

Accountant