

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Mar 19, 2001 8:00 am**  
**Secretary of State**

03-19-2001 90454 035 \*\*\*150.00

**DOCUMENT # P00000106271**

1. Entity Name  
**ONE TEL WIRELESS, INC.**

Principal Place of Business  
**11221 SW 88 STREET STE C-210  
MIAMI FL 33176**

Mailing Address  
**11221 SW 88 STREET STE C-210  
MIAMI FL 33176**

2. Principal Place of Business  
**18481 Miramar Parkway**  
Suite, Apt. #, etc.

3. Mailing Address  
**18481 Miramar Parkway**  
Suite, Apt. #, etc.

City & State  
**MIRAMAR, FL**  
Zip  
**33029**  
Country  
**USA**

City & State  
**MIRAMAR, FL**  
Zip  
**33029**  
Country  
**USA**

4. FEI Number  
**65-1053105**  
Applied For  
☐ Not Applicable

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

**RODRIGUEZ, CESAR**  
**11221 SW 88 STREET STE C-210  
MIAMI FL 33176**

Name  
**Rodriguez, Daniel**  
Street Address (P.O. Box Number is Not Acceptable)  
**18481 Miramar Parkway**  
City  
**Miramar** **FL** Zip Code  
**33029**

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  **DANIEL RODRIGUEZ**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **PRESIDENT** DATE **02/23/01**

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  
**PD**  
**RODRIGUEZ, CESAR**  
**11221 SW 88 STREET STE C-210**  
**MIAMI FL 33176** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD**  
**RODRIGUEZ, DANIEL**  
**18481 Miramar Parkway**  
**Miramar, FL 33029** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD**  
**HERNANDEZ, RENE L.**  
**18481 MIRAMAR PARKWAY**  
**MIRAMAR, FL 33029** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
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CITY-ST-ZIP  
☐ Delete

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

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
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STREET ADDRESS  
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:  **DANIEL RODRIGUEZ**  
Signature and typed or printed name of signing officer or director. **PRESIDENT** Date **02/23/01** Daytime Phone # **305-491-6899**

CR2E034 (10/00)