

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2002 8:00 am
Secretary of State

05-10-2002 90046 047 ***150.00

DOCUMENT # P01000002671

1. Entity Name
SB WIRELESS, INC.

Principal Place of Business **Mailing Address**
~~8000 WEST 28TH COURT, APT. #205~~ ~~8000 WEST 28TH COURT, APT. #205~~
~~HALEAH FL 33016~~ ~~HALEAH FL 33016~~

338934



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business **3. Mailing Address**
471 N.E. 167 Street **471 N.E. 167 Street**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
North Miami Beach, FL **North Miami Beach, FL**
Zip **Country** **Zip** **Country**
33162 **USA** **33162** **USA**

4. FEI Number **Applied For**
65-1125169 **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

LOZANO, ISMAEL JR
~~8000 WEST 28TH COURT, APT. #205~~
~~HALEAH FL 33016~~

Name
Street Address (P.O. Box Number is Not Acceptable)
471 N.E. 167 Street
City **State** **Zip Code**
North Miami Beach FL 33162

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** _____
 Signature, typed or printed 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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D LOZANO, ISMAEL JR 8000 WEST 28TH COURT, APT. #205 HALEAH FL 33016	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	471 N.E. 167 Street North Miami Beach, FL 33162
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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: Ismael Jr. Lozano
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2402 **305-6574121**
 Date Daytime Phone #

CR2E034 (9/01)