

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

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90063 023 ***158.75

DOCUMENT # P01000063016 ✓

1. Entity Name

AIRDATA Communications, Advertising, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

290 Sunrise Drive

Suite, Apt. #, etc.

Suite 3-H

3. Mailing Address

290 Sunrise Drive

Suite, Apt. #, etc.

Suite 3-H

DO NOT WRITE IN THIS SPACE

City & State

Key Biscayne Fl.

City & State

Key Biscayne Fl.

4. FEI Number

65-111 8026

Applied For

Not Applicable

Zip

33149

Country

USA

Zip

33149

Country

USA

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

Fernando Pastor

Street Address (P.O. Box Number is Not Acceptable)

290 Sunrise Drive

3-H

City

Key Biscayne

FL

Zip Code

33149

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

[Signature] President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04-24-02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$81.25

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

TITLE	<u>President</u>
NAME	<u>Fernando A. Pastor</u>
STREET ADDRESS	<u>290 Sunrise Dr.</u>
CITY-ST-ZIP	<u>Key Biscayne, Fl. 33149</u>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] Fernando Pastor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-24-02 (305) 345-6275

Date Telephone

CR2E034B (12/01)