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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DOCUMENT # P21915

(4)

MOBILE TELECOMMUNICATION TECHNOLOGIES CORP.

Principal Place of Business Mailing Address 200 S. LAMAR ST., SUITE 400 P.O. BOX 2469 STE. 1000 **JACKSON MS 39225-2469** JACKSON MS 39225-2469 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/30/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 64-0518209 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY 1201 HAYES STREET Street Address (P.O. Box Number is Not Acceptable) Tallahassee FL 32301 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change **Addition STUPKA, JOHN T** NAME 1.2 NAME Tenni Hudson 200 S. LAMAR STREET 200 S. Laman Street STREET ADDRESS 1.3 STREET ADDRESS JACKSON MS CITY-ST-ZIP 1.4 CITY-S1-ZIP Jackson, MS 39201 ËVP DELETE Addition TITLE Change 2.1 TITLE BHAGAT, JAI P. NAME 2.2 NAME 200 S. LAMAR ST., STE. #900 STREET ADDRESS 2.3 STREET ADDRESS JACKSON MS CITY-ST-ZIP 2. 4 CiTY-S1-ZiP DELETE TITLE Change Addition 3.1 TITLE FERGUSON, THOMAS R NAME 3.2 NAME 200 S. LAMAR ST. ,STE 900 STREET ADDRESS 3.3 STREET ADDRESS JACKSON MS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 THILE KRISS, LEONARD G. NAME 4. 2 NAME 200 S. LAMAR ST. STREET ADDRESS 4.3 STREET ADDRESS JACKSON MS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME

4. CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 13 if changed, or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 City-St-ZiP

6.1 TITLE

6.2 NAME

CICNATURE 101 C P 11 down

DELETE

CR2E034 (10/97)

Addition

FILED

Apr 23 1998 8:00am

Secretary of State