

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000052599

1. Entity Name

UNITED WIRELESS TECHNOLOGIES INC.

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90059 027 ***150.00

Principal Place of Business

1140 HOLLAND DRIVE
SUITE 4
BOCA RATON FL 33487
US

Mailing Address

1140 HOLLAND DRIVE
SUITE 4
BOCA RATON FL 33487-2750
US

2. Principal Place of Business

6560 West ROGERS CIRCLE

Suite, Apt. #, etc.

14

City & State
BOCA RATON, FLORIDA

Zip
33487

Country
USA

3. Mailing Address

6560 West ROGERS CIRCLE

Suite, Apt. #, etc.

14

City & State
BOCA RATON, FLORIDA

Zip
33487

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0427194

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CAVAYERO, STEPHEN B
6876 QUEENFERRY CIRCLE
SUITE 201
BOCA RATON FL 33496

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CAVAYERO, STEPHEN B
1140 HOLLAND DRIVE, SUITE 4
BOCA RATON FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
TRIANA, RAMON A
1140 HOLLAND DRIVE, SUITE 4
BOCA RATON FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
6560 West Rogers Circle, #14
Boca Raton, Florida 33487

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
6560 West Rogers Circle, #14

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

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

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

TITLE
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-2000

Date

(561) 995-2132

Daytime Phone #

CR2E034 (9/99)