SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON QR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Jul 25 1997 8:00am Secretary of State

FILED

DOCUMENT # P9400005909 (4) G&P WIRELESS MANAGEMENT INC							
Principal Place of Business Mailing Address			-,				AI 1011
546 SANDY HOOK RD TREASURE ISLAND FL 33706		546 SANDY HOOK RD TREASURE ISLAND FL 33706		DO NOT MIRITE	IN THIS SPACE		
					3. Date Incorporated or Qualified	3a. Date of Last Repo	ort
					01/14/1994 4. FEI Number	02/07/1996	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applie	ed For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.					59-3220358	ER 75	pplicable
22 27					5. Certificate of Status Desired	Fee Requi	
City & State City & State					6. Election Campaign Financing	\$5,00 Ma	зу Ве
23	28				Trust Fund Contribution	Added to F	
Zip 24	Country 25	7ip Country			B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, Yes No		
27]	9. Name and Address of Current Registered Agent				10, Name and Address of New Re		
0'0	ONNELL, BONNIE D		81	Name			
546 SANDY HOOK RD TREASURE ISLAND FL 33706			82	Street Add	dress (P.O. Box Number is Not Acceptate	ole)	
			83				
			03				
			84	City		FL 85 Zip Coo	et
11. Pursuant t	o the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the above	-named cor	poration submits this statement for the p	purpose of changing its re	egistered
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 eyent and title if spipicatio (NOTE 12. OFFICERS AND DIRECTORS			TE Registered Age	int signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS II	N 12
TITLE	D	DELETE	1.1 TITLE		ABBITION OF THE GEO TO OF THE		Addition
NAME	O'CONNELL, M.P.		1.2 NAME				
STREET ADDRESS	546 SANDY HOOK RD		1.3 STREET ADDRESS				
CITY-ST-ZIP	TREASURE ISLAND FL 33708		1.4 CITY-S	T-ZiP		Change	Addition
TITLE NAME	D D D D D D D D D D D D D D D D D D D	- Detreit	2.1 TITLE 2.2 NAME			Change	Audition
STREET ADDRESS	PICKEL, GARY M RT 1 BOX 4935		2.3 STREET	ADDRESS			
CiTY-ST-ZIP	WILLISTON FL 32696		2. 4 CITY -	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS	l l		3.3 STREET ADDRESS : 3.4. CITY-ST-ZIP				ł
CITY-ST-ZIP TITLE	DELETE		4.1 TITLE	01-71		Change [Addition
NAME			4, 2 NAME			-	
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP		Donese	4.4 CITY - S	T-ZIP			A Augusti
TITLE	DELETE		5.1 TITLE			L. Change L	Addition
NAME Street address			5.2 NAME 5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - S	1	•		
TITLE		☐ DELETE 6:		<u> </u>		☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET		•]
14. I do heret	by certify that the information supplied	vitinhis filing does not qual	6.4 City-5	nption state	ed in Section 119.07(3)(i), Florida Statute	s. I further certify that the	
14. I do hereby certify that the information supplied (vitifying 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 supplied on the same legal effect as if made under oath, that I am an officer or dreglor in the corporation or the recovered or the corporation or the recovered to the corporation or the recovered to the corporation of the cor							
SIGNATURE: BURNIED ON THE MILLOWHIE BOWNIED O CONNELL 7-21-97							