FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000066613 (8)

1. Corporation Name
CELLSTAR DIGITAL COMMUNICATIONS, INC.

Principal Place of Business	Mailing Address
1515 S ORLANDO AVENUE SUITE A ORLANDO FL 32751	1515 S ORLANDO AVENUE SUITE A ORLANDO FL 32751

3. Date Incorporated or Qualified: 09/12/1994
3a. Date of Last Report: N/A

2. Principal Place of Business — 21 / 22 Suite, Apt. #, etc / 23 City & State / 24 Zip / 25 Country
2a. Mailing Address — 26 / 27 Suite, Apt. #, etc. / 28 City & State / 29 Zip / 30 Country

4. FEI Number: 59-3266802 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

CAPELLI, JOSEPH
1515 S ORLANDO AVENUE
SUITE A
ORLANDO FL 32751

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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.

SAME REGISTERED AGENT
NO SIGNATURE REQUIRED

SIGNATURE ______ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT & CEO and DIRECTOR	1 1 TITLE	TREASURER & CORP. DIRECTOR ☐ Change ☑ Addition
NAME	JOE CAPELLI	1 2 NAME	DON REYNOLDS
STREET ADDRESS	908 Riverbend Blvd.	1 3 STREET ADDRESS	1014 EDGEWATER COURT
CITY-ST-ZIP	LONGWOOD, FL 32779	1 4 CITY-ST-ZIP	ORLANDO, FL 32804
TITLE	CORPORATE DIRECTOR	2 1 TITLE	VP MARKETING & CORP. DIRECTOR ☐ Change ☑ Addition
NAME	CHRISTOPHE COUALLIER	2 2 NAME	DON WARZOCHA
STREET ADDRESS	849 S. WYMORE Rd., 26A	2 3 STREET ADDRESS	1315 HAMPSHIRE PLACE CR.
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714	2 4 CITY-ST-ZIP	ALTAMONTE SPGS FL 32714
TITLE	CORPORATE DIRECTOR	3 1 TITLE	☐ Change ☐ Addition
NAME	KEN DINKLAGE	3 2 NAME	
STREET ADDRESS	620 E. COLONIAL DR., Box 833709	3 3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FL 32853	3 4 CITY-ST-ZIP	
TITLE	CORPORATE DIRECTOR	4 1 TITLE	☐ Change ☐ Addition
NAME	JIM FANELLI c/o RYDER Systems	4 2 NAME	
STREET ADDRESS	3600 NW 82nd Avenue	4 3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33166	4 4 CITY-ST-ZIP	
TITLE	SECRETARY & CORP DIRECTOR	5 1 TITLE	☐ Change ☐ Addition
NAME	CLAUDE HUNTER	5 2 NAME	
STREET ADDRESS	620 E. COLONIAL Dr., Box 531166	5 3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FL 32853	5 4 CITY-ST-ZIP	
TITLE	CORP. DIRECTOR	6 1 TITLE	☐ Change ☐ Addition
NAME	ROMAN INOCHOVSKY	6 2 NAME	
STREET ADDRESS	132 POWELL Blvd., # 9307	6 3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH, FL 32114	6 4 CITY-ST-ZIP	7/27

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ______ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 4-28-95 — Daytime Phone #: 407-740-7704

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