FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P94000075128 (6)

AMERITECH CELLULAR, INC.



Principal Place of Business Mailing Address							itai ma tii ika i	IF W IJ W I FAI		
6073 NW 16 MIAMI FL 33	8073 NW 167 ST. U MIAMI FL 33015	· · · · · · · · · · · · · · · · · · ·								
US ⁻			US				3. Date incorporated or Qualified 3 10/10/1994		of Last Report 05/01/1995	
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		F	Applied For
21 325 (Cameron Drive	26					65-0539885 Not Applicat			
Suite, Apt. #,	, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired) ;		Additional Required
City & State	Lauderdale FL		City & State 28 Ft. Lawder date			F)	6. Election Campaign Financing Trust Fund Contribution]	\$5.00 May Be Added to Fees	
23 <i>F4. C</i>	Country		Zip	Cour	ntrv	/_ <u></u>	This corporation has liability for inter-	noible tax u		
24 ~ 3332	26 25 USA	29	33326	30 4	دكرا	<i>A</i>	Florida Statutes Yes			1001002,
	g. Name and Address of Curre		red Agent		_		10. Name and Address of New Regi	stered Ag	ent	
					81	Nanie				
SCHMIC	OT, RON				82	Street Add	ress (P.O. Box Number is Not Acceptable)			
245 N UNIVERSITY DR					-	Gueet Addi	1050 C TO CONTINUE IN THE CONTINUE OF			
•	OKE PINES FL 33024				83					
				-	64	City			85 Zır	Code
4					J4	City		FL	***	
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12.	OFFICERS AN	ND DIRECT		13.			ADDITIONS/CHANGES TO OFFICE			
TOTLE	D		DELETE	1 1 1					Change	Addition
NAME	GRZYB, JOSEPH A	UT 0 05		1.2 NA			325 Cameron Or Ft. Lowler dale, F.			
STREET ADDRESS	6073 NW 167 STREET UN	III U-25				ADDRESS	515 CAMETON OF	2 227	12.	
CITY-ST-ZIP	MIAMI FL 33015		DELETE			<u>ST - ZIP</u>	Fr. Couser dale, F.	6 223 N₃	Chaona	Addition
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STREET ADDRESS				l.		LADDRESS				
CITY-SI-ZIP				3.4.00						
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NAME				4.2 NA	ME.					
STREET ADDRESS				4 3 ST	HEEL	I ADDRESS				
arrice rispinedo						1				
City-St-ZIP		Manage 177, MRS 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		4 4 Ci	TY - S	51 - ZIP	, ,,			
		B	☐ DELETE	4 4 Ci		ST - ZIP			Change	Addition
CITY-ST-ZIP			☐ DELETE		TLF	5T - ZIP	20000182	890	2	Addition
CITY-ST-ZIP TITLE	A	Base 17 (1881)	☐ DELETE	5 1 TI 5 2 NA	TLE NME	T ADDRESS	20000182: -05/20/960103	890	2	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				5 1 TI 5 2 NA 5 3 SI 5 4 CI	ITLE NME IHEEI IY-S		200001829 -05/20/960103 ***200.00	890 602	12	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		N 1 (N 1 , N 1	☐ DELETE	5 1 TI 52 NA 53 SI 54 CI 6 1 TI	ITLE MME IHEEI IY - S	ADDRESS	-05/20/960103	890 602	2	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				5 1 TI 52 NA 53 SI 54 CI 6 1 TI 62 NA	ITLE MME IHEEI IY - S ITLE MME	ADDRESS ST-ZIP	-05/20/960103	890 602	12	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				5 1 TI 52 NA 53 SI 54 CI 6 1 TI 62 NA 63 SI	TLE MME TY - S TLE MME TREE	ADDRESS	-05/20/960103	890 602	12	Addition

certify that the information indicated on this arinual 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:

AND TAPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

28 Apr 96

705 384 7334