

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000076369

1. Corporation Name

TRANSMEDIA WIRELESS SERVICES, INC.

Principal Place of Business

5323 LAKEWORTH RD.
GREENACRES FL 33463
US

Mailing Address

5323 LAKEWORTH RD.
GREENACRES FL 33463
US

FILED

99 OCT 13 AM 10:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/17/1994

4. FEI Number

65-0534111

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.



Yes



No

9. Name and Address of Current Registered Agent

HOWARD, MICHAEL
5323 LAKEWORTH RD
GREENACRES FL 33463

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.

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

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

P T D

☒ Change ☐ Addition

600003021746--1

-10/22/99-01013-010

***150.00 ***150.00

Howard, Lynn VS

5323 Lakeworth Rd.

Greenacres, FL 33463

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael Howard
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-8-99
Date

(561)357-9100
Daytime Phone #

CR2E034 (5/99)

2

Lance P. Mirrer, CPA, P.A.
Certified Public Accountants & Financial Consultants
PO Box 260879
Pembroke Pines, FL 33026
(954) 432-1099/FAX (954) 443-6123
E-mail: cpa@taxmancpa.com

October 7, 1999

Florida Department of State
Division of Corporations
Annual Report Filings
Box 1500
Tallahassee, FL 32302-1500

Re: **Transmedia Wireless Services, Inc.**
Doc # P94000076369

Dear Madam or Sir:

I have received your letter of September 27, 1999, returning the corporate annual report and payment. Please review this case because I believe there is sufficient reasonable cause to abate the late filing fee.

This corporation never received their initial filing notice. When they did not receive your renewal notice, they believed I, as their CPA had filed the report for them.

Enclosed are properly completed & executed 1999 Annual Report and payment for the above corporation. On behalf of this corporation, I request you to abate the late filing penalty due to reasonable cause and accept the enclosed payment.

Please call if you need any further information or clarification on this matter.

Sincerely,


Lance P. Mirrer, CPA

SENT CERTIFIED MAIL, RETURN RECEIPT REQUESTED # Z 847 019 115