FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000026085

1. Corporation Name

Principal Place of Business

WIRELESS WORLD, INC.

6298 N FEDERA	AL HWT	264						
264 FT LAUDERDALE FL 33308 US		FT LAUDERDALE FL 33308 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/03/1995			
								2 Principal P
21	ideo of bookings	26			65-0580445	No	t Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.				\$8.75 A	dditional	
22	n, 0.0.	27			5. Certifcate of Status Desired	Fee Re	quired	
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible			
24	25 29 30		0	1 bisolitar 1 reporty			□No	
-	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent		
	. = 5:		81	Name				
	IAM STECKBECK IN FEDERAL HWY			Street Add	Address (P.O. Box Number is Not Acceptable)			
#264		[8		1			· · · · · ·	
	AUDERDALE FL 33308					or Zin C	`	
			84	'	F	85 Zip C	1	
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0592 egistered agent, or both in the Static m familiar with find accept the officer	and 607.1508, Florida Statutes of Fibrida. Such change was aut onl of, Section 607.0505, Florid	the above horized by la Statute:	e-named cor the corporat s.	rporation submits this statement for the purpose tion's board of directors. I hereby accept the app	of changing its i	registered pistered	
SIGNATURE	Signature, typed or printed name of registered agent	and trile if applicable. (NOTE: R	legistered Age	ent signature requi	ired when reinstating) DATE		7	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition	
NAME	STECKBECK, WILLIAM		1.2 NAME					
	6298 N FEDERAL HWY #264			TADDRESS				
STREET ADDRESS			1.4 CITY-1	1				
CITY-ST-ZIP	FT LAUDERDALE FL 33308	☐ DELETÉ	2.1 TITLE	31-ZIF		Change	Addition	
TITLE		□ perrir	1			44		
NAME			2.2 NAME	1				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			2.4 CITY-	ST-ZIP		Change	Addition	
TITLE		☐ DELETE	3.1 TITLE			☐ Change		
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	TADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE]		Change	☐ Addition	
NAME			5.2 NAME	-				
STREET ADDRESS			5.3 STREE	ET ADDRESS				
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition	
NAME			6.2 NAME					
OTDERT ADDRESS			6.3 STREE	ET ADDRESS				

6.4 CITY-ST-ZIP

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 with all given like empowered.

SIGNATURE:

CITY-ST-ZIP

FILED May 08, 1999 8:00 am Secretary of State

05-08-1999 90087 009 ***150.00