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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600002864 (2)

PROFESSIONAL WIRELESS SYSTEMS INC.

3801 VINELAN SUITE 15 ORLANDO FL US 2. Principal Pla 21 Suite, Apt # 22 City & State	ace of Business	3601 VINELAND RD SUITE 15 ORLANDO FL 32811 US 28. Mailing Address 26 Suite, Apt. #, etc. 27 City & State		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified 01/05/1996 4. FEI Number 59-3359255 5. Certificate of Status Desired 6. Election Campaign Financing	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζiρ 24	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the concentration of the personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
120 OR	9. Name and Address of Current OFFO, JAMES A 06 SWEETBRIAR ROAD HANDO FL 32806	and 607 1609 Useida State	83 84 City	ddress (P.O. Box Number is Not Acceptable) Floorporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	of changing its registered
agent. Far SIGNATURE	agistered agent, or both, in the state to in familiar with, and accept the obligation of agent Signature, typed or printed name of register of agent	ions of, Section 607.0505, F	forida Statutes. OTE: Registered Agent signature res	quired when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STOFFO, JAMES A 1206 SWEETBRIAR ROAD ORLANDO FL 32806	[] DELETE	1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY-S1-ZIP		Change L.J Addition
TITLE NAME STREET ADDRESS		DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS		DELLTE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELFTE	3.4. CHY - S1-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		□ DELFTE	4.4 CHY-SI-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	5.4 CHY-S1-7IP 6.1 THLE 6.2 NAME 6.3 STREFT ADDRESS 6.4 CHY-S1-7IP		Change Addition
NAME STREEI ADDRESS CITY-ST-ZIP 14. I hereby c indicated officer or c	on this propert report or superformed at	n this filing does not qualify annual report is true and a ver or trustee empowered to	6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-7IP for the exemption stated	in Section 119.07(3)(i), Ftorida Statutes. I further ature shall have the same legal effect as if made i equired by Chapter 607, Florida Statutes; and tha	certify the