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Feb 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000004192 (6)

1. Corporation Name
LIBERTY WIRELESS, INC.

Principal Place of Business

P.O. BOX 290841
TAMPA FL 33687-0841

Mailing Address

P.O. BOX 290841
TAMPA FL 33687-0841



3. Date Incorporated or Qualified

01/10/1996

3a. Date of Last Report

2. Principal Place of Business

21 1214 E. FOWLER AVE

Suite, Apt #, etc.

22 City & State

23 TAMPA, FLORIDA

Zip

24 33622

Country

25 USA

2a. Mailing Address

26

Suite, Apt #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

59-335-33-42

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

MASTERS, NIKLESH H
2435 NEW TAMPA HIGHWAY
LAKELAND FL 33801

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 PD
NAME MASTERS, NIKLESH H
STREET ADDRESS 2225 EAST 131ST AVENUE, #1908
CITY-ST-ZIP TAMPA FL 33612

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ~~VICE PRESIDENT~~ VICE PRESIDENT ☐ Change ☒ Addition
1.2 NAME ASMITA MASTERS
1.3 STREET ADDRESS 2435 NEW TAMPA HWY
1.4 CITY-ST-ZIP LAKELAND, FL 33801

2.1 TITLE P/D
2.2 NAME NIKLESH MASTERS
2.3 STREET ADDRESS 2435 NEW TAMPA HWY
2.4 CITY-ST-ZIP LAKELAND, FL 33801

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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:

Niklesh Masters NIKLESH MASTERS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/97
Date

813-972-4567
Daytime Phone #

CR2E034 (9/96)