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**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600039497 (8)

## **FILED** May 16 1997 8:00am Secretary of State

ABLE WIRELESS, INC.  Principal Place of Business Mailing Address  1801 FORUM PLACE, SUITE 1110 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401-8105									
		_			3. Date Incorporated 05/03/1996	or Qualified	Sa. Date of Las	t Report	
2. Principal Place o	f Business	2a. Mailing Addre	ess		4. FEI Number	214	-	Applied For Not Applicable	
Suite, Apt #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State	· · · · · · · · · · · · · · · · · · ·		6. Election Campaig	•		00 May Be	
<b>23</b>   Zip	Country	<b>28</b> Zip	Co	untry	Trust Fund Contrib  8. This corporation f	as liability for in	tangible tax unde	ed to Fees er s. 199.032,	
24	25	29	30	<b>*</b> ***********************************	Florida Statutes		Yes No		
	Name and Address of Curre	nt Registered Agent			10. Name and Addre	as of New Reg	istered Agent		
	10, WILLIAM J			81 Name					
1601 FOF West Pa		82 Street Add		Address (P.O. Box Number is	dress (P.O. Box Number is Not Acceptable)				
***************************************				83					
				84 City			FL 85 Z	ip Code	
11. Pursuant to the office or registe	red agent, or both, in the State	e of Florida. Such chan	ge was authorize	d by the corp	poration's board of directors.	r nereby accept	nio appointment		
SIGNATURE	provisions of Sections 607.05 red agent, or both, in the Statishar wift, and accept the oblight the type of reputed name of registered as OFFICERS AT				poration's board of directors.  Trequired when reinstating)  ADDITIONS/CHAN		DATE		
SIGNATURE Signatur	nel typed or printed name of registered as	gent and title if applicable	(NOTE: Flegisters	ed Agent signature	required when reinstating)  ADDITIONS/CHAN		DATE	ORS IN 12	
SIGNATURE Signature  12. THE D	nel typed or printed name of registered as	gent and title If applicable	(NOTE: Register	ed Agent signature	ADDITIONS/CHAN	GES TO OFFICE	DATE RS AND DIRECT	ORS IN 12	
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR