


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

FILED

Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000039497 (8)**

1. Corporation Name

ABLE WIRELESS, INC.

Principal Place of Business

**1601 FORUM PLACE, SUITE 1110
WEST PALM BEACH FL 33401**

Mailing Address

**1601 FORUM PLACE, SUITE 1110
WEST PALM BEACH FL 33401**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/03/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

Country

29

Zip

Country

4. FEI Number

65-0666274

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**MERCURIO, WILLIAM J
1601 FORUM PLACE, SUITE 1110
WEST PALM BEACH FL 33401**

10. Name and Address of New Registered Agent

81 Name

Hall, Gerry W.

82 Street Address (P.O. Box Number is Not Acceptable)

1601 Forum Place

83

Suite 1110

84 City

West Palm Beach

FL

85 Zip Code

33401

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

Gerry W. Hall
Signature: typed or printed name of registered agent and title if applicable.

Gerry W. Hall, Chairman and President 01/06/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MERCURIO, WILLIAM J	
STREET ADDRESS	1601 FORUM PLACE, SUITE 1110	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CAUDILL, BILLY B	
STREET ADDRESS	800 W CYPRESS CREEK BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL	

TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	OSBORNE, DANIEL L	
STREET ADDRESS	1601 FORUM PL #1110	
CITY-ST-ZIP	WEST PALM BCH FL	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DCP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Hall, Gerry W.	
1.3 STREET ADDRESS	1601 Forum Place, Suite 1110	
1.4 CITY-ST-ZIP	West Palm Beach, FL 33401	<input type="checkbox"/> Change <input type="checkbox"/> Addition

2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Ray, Billy V.	
3.3 STREET ADDRESS	1601 Forum Place, Suite 1110	
3.4 CITY-ST-ZIP	West Palm Beach, FL 33401	<input type="checkbox"/> Change <input type="checkbox"/> Addition

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET 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.

SIGNATURE: *Gerry W. Hall* **Gerry W. Hall**

01/06/98

(561) 688-0400

CR2E034 (10/97)