

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 30 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P96000045228 (9)
 1. Corporation Name
ECS ENHANCED CELLULAR SYSTEMS MANUFACTURING, INC



Principal Place of Business: 12910 S.W. 89TH COURT MIAMI FL 33176
 Mailing Address: 12910 S.W. 89TH COURT MIAMI FL 33176

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	7823 NW 15 STREET	26	7823 NW 15 STREET	05/28/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0705135	
City & State		City & State		Applied For	
23 MIAMI, FL		28 MIAMI, FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 33126		29 33126		<input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing Trust Fund Contribution	
25 USA		30 USA		<input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
SCHNEIDER, JAMES M ESO 200 EAST LAS OLAS BLVD. SUITE 1900 FT. LAUDERDALE FL 33301				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SCHNEIDER, JAMES M ESO 200 EAST LAS OLAS BLVD. SUITE 1900 FT. LAUDERDALE FL 33301				81 Name DAVID S. MANDEL			
				82 Street Address (P.O. Box Number Is Not Acceptable) 1200 Alfred I. DuPont Bldg.			
				83 169 East Flagler Street			
				84 City Miami			
				85 Zip Code FL 33131			

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]* DAVID S. MANDEL 9/23/98
Signature, name and printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	TALBOT, KEITH	1.2 NAME	MICHAEL BEARDS
STREET ADDRESS	12910 S.W. 89TH COURT	1.3 STREET ADDRESS	7823 NW 15 STREET
CITY-ST-ZIP	MIAMI FL 33176	1.4 CITY-ST-ZIP	MIAMI, FL 33126
TITLE	D	2.1 TITLE	EDWARD WIENS
NAME	CUNNINGHAM, LAWRENCE R	2.2 NAME	7823 NW 15 STREET
STREET ADDRESS	12910 S.W. 89TH COURT	2.3 STREET ADDRESS	MIAMI, FL 33126
CITY-ST-ZIP	MIAMI FL 33176	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *[Signature]* Edward Wiens Sept 22/98 (305) 717-3233

CR2E034 (5/98)