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

PROFIT CORPORATION ANNUAL REPORT

1997

011Y-ST-72

STREET ADDRESS

Lam an officer or director of the appears in Block 12 or Blog

SIGNATURE:

THILE

NAMÉ



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

POCUMENT # P96000064675 (7)

SHELLULAR COMMUNICATIONS, INC.

Principal Place of Business Mailino Address 1671 US HIGHWAY ONE 1671 US HIGHWAY ONE SEBASTIAN FL 32958-3817 SEBASTIAN FL 32858 3. Date Incorporated or Qualified 3a. Date of Last Report 08/01/1996 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Applied For 21 26 Not Applicable Suite Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country This corporation has liability for intangible tax under s. 199.032, 24 29 30 Florida Statutes Yes No 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HADAWAY, SABRA 1671 US HIGHWAY ONE Street Address (P.O. Box Number is Not Acceptable) 82 SEBASTIAN FL 32958 83 City 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 (NOTE: Flogistered Agent signature required when reinstaling) Signature, type it or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. OFFICERS AND DIRECTORS 13. Change Addition DELETE THILE 1.1 TITLE HADAWAY, JOHN NAME 1.2 NAME CR2E034 1671 US HIGHWAY ONE 1.3 STREET ADDRESS STREET ADDRESS SEBASTIAN FL 32958 CHY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition THEF 2.1 TITLE HADAWAY, SABRA NAME 2.2 NAME 1671 US HIGHWAY ONE 2.3 STREET ADDRESS STREET ADDRESS SEBASTIAN FL 32958 CI1Y - \$1 - 7IP 2.4 CITY - ST-ZIP DELETE Change ■ Addition 3.1 TITLE THEF NAVe 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CHY-\$1-209 DELETE Change Addition 4.1 TITLE THLE 4.2 NAME NAML 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP City - \$1 - 2)P DELETE Change Addition 51 TITLE Tille 52 NAME NAME **53 STREET ADDRESS** STREET ADDRESS

54 CITY-ST-ZIP

6.4 CITY - ST - ZIP

or supplemental appear report is true and accurate and that my signature shall have the same legal effect as if made under oath; that

61 THLE

6.2 NAME 6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and cated on this annual report is upper or supplied each as if made under

DELETE

FILED Apr 10 1997 8:00am Secretary of State



Change

Addition