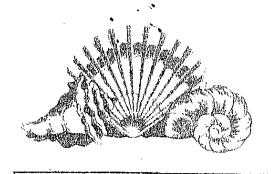
2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Aug 29, 2000 8:00 am Secretary of State DOCUMENT # P9600064675 SHELLULAR COMMUNICATIONS, INC. 08-29-2000 90033 023 ***150.00 Principal Place of Business Mailing Address 1671 US HIGHWAY ONE 1671 US HIGHWAY ONE SUITE D SEBASTIAN FL 32958 SEBASTIAN FL 32958 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0732570 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HADAWAY, SABRA Street Address (P.O. Box Number is Not Acceptable) 1671 US HIGHWAY ONE SEBASTIAN FL 32958 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00. 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be' After SEPTEMBER 13, 2000 Min. will 6e \$750.00 Tax filing requirement and elects to do so .-Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition ☐ Delete TITLE HADAWAY, SABRA NAME NAME 1671 US HIGHWAY ONE STREET ADDRESS STREET ADDRESS SEBASTIAN FL 32958 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change --- - Addition: Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME' NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all officer in the empowered.

FILED

tachment H 1960WX4675





Shellular Communications d/b/a Sebastian Cellular 1671 N US #1, Ste D Sebastian, FL 32958 (561)388-2516 phone (561)388-5960 fax

MEMOSHEET

DATE: AUGUST 23, 2000

UNIFORM BUSINESS REPORT

TO: DIVISION OF CORPORATIONS

TEL:

FAX:

FORMERLY KNOWN AS ANNUAL REPORTS

FROM: SABRA-

TEL:

FF1 # 65-0732570

SUBJECT: RENEWAL FORM / FILING FEE AND PENALTY

OF PAGES:

CC:

A MESSAGE FOR YOU......

Per my phone conversation today with Marie (who was friendly and helpful 1) enclosed, play find the 2000 UBR form with check #2837-for-\$ 150.00 representing the "filing fee".

and form packet please accept my request to Wave the \$ 400.00 penally

hank you