

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jul 13, 2000 8:00 am
Secretary of State

07-13-2000 90022 046 ***150.00

DOCUMENT # P96000076742

1. Entity Name
WIRELESS TECHNOLOGIES, INC.

R

Principal Place of Business

2400 E. COMMERCIAL BLVD.
SUITE 630
FT. LAUDERDALE FL 33308

Mailing Address

2400 E. COMMERCIAL BLVD.
SUITE 630
FT. LAUDERDALE FL 33308

2. Principal Place of Business

2755 E. Oakland Pk. Blvd.
Suite, Apt. #, etc.
101

3. Mailing Address

2755 E. Oakland Pk. Blvd.
Suite, Apt. #, etc.
101

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

Zip

33306

Country

USA

Zip

33306

Country

USA

4. FEI Number

65-0700213

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SADRIWALLA, ABBAS
2400 E. COMMERCIAL BLVD.
SUITE 630
FT. LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name SADRIWALLA, ABBAS
Street Address (P.O. Box Number is Not Acceptable)
2755 E. Oakland Pk. Blvd.
101
City Ft. Lauderdale, FL Zip Code 33306

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)

DATE

Abbas Q. Sadriwalla

07-10-00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SADRIWALLA, ABBAS 2400 E. COMMERCIAL BLVD. FT. LAUDERDALE FL 33308	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SADRIWALLA, DEBORAH 3070 NE 40 CT FT LAUDERDALE FL 33308	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SADRIWALLA, ABBAS 2755 E. Oakland Pk. Blvd. # 101 Ft. Lauderdale, FL 33306	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07-10-00

Date

(954) 566-0996

Daytime Phone #

CP2:0311(5/00)

*Attachment
PH 96000076742
DW 69956*

WIRELESS TECHNOLOGIES, INC.

2755 E. Oakland Park Blvd., Suite 101
Ft. Lauderdale, FL 33306
Tel 954-566-0004 Fax 954-566-0992

July 10, 2000

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: 2000 Uniform Business Report:

To Whom It May Concern:

We did not receive the initial 2000 Uniform Business Report, and would have filed the report and paid timely, had we received it.

Attached are the signed report and our check for \$150.00.

Thank you for your cooperation.



Abbas A. Sadriwalla
President