

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

FILED

May 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra E. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #

1. Corporation Name

CARIBBEAN WIRELESS, INC.

Principal Place of Business

3190 S. State Rd 7, #A15
Miramar, FL 33023

Mailing Address

(SAME)

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4/9/97

2. Principal Place of Business

21 3190 S. State Rd 7

Suite, Apt. #, etc.

22 #A15

23 City & State
Miramar, FL

24 Zip
33023

Country
USA

2a. Mailing Address

26 3190 S. State Rd 7

Suite, Apt. #, etc.

27 #A15

28 City & State
Miramar, FL

29 Zip
33023

Country
USA

4. FEI Number

65-0737237

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

Christine M. Simmers
8810 NW 77th Ct.
Tamarac, FL 33321

10. Name and Address of New Registered Agent

81 Name

Matthew F. Kemp

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

4611 S. University Dr

83

Suite 160

84 City
Davie

FL

85 Zip Code
33328

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE Matthew F. Kemp

Matthew F. Kemp

4/20/98

12. OFFICERS AND DIRECTORS

TITLE	President	☒ DELETE
NAME	Marvin T. Washington	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President	☒ DELETE
NAME	Jeffrey Lee Stein	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Secretary/Treasurer	☐ DELETE
NAME	Matthew F. Kemp	
STREET ADDRESS	4611 S. University Dr., Suite 160	
CITY-ST-ZIP	Davie, FL 33328	
TITLE	Registered Agent	☒ DELETE
NAME	Christine M. Simmers	
STREET ADDRESS	8810 NW 77th Ct.	
CITY-ST-ZIP	Tamarac, FL 33321	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	☒ Change ☐ Addition
1.2 NAME	Geraldo Gomez	
1.3 STREET ADDRESS	540 Brickell Key Dr., Apt. 1008	
1.4 CITY-ST-ZIP	Miami, FL 33131	
2.1 TITLE	Vice President	☒ Change ☐ Addition
2.2 NAME	Kenneth B. Taylor	
2.3 STREET ADDRESS	18340 NW 68th Ave.	
2.4 CITY-ST-ZIP	Miami, FL 33015	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Registered Agent	☒ Change ☐ Addition
4.2 NAME	Matthew F. Kemp	
4.3 STREET ADDRESS	4611 S. University Dr., Suite 160	
4.4 CITY-ST-ZIP	Davie, FL 33328	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ 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:

Matthew F. Kemp

4/20/98

Date

Daytime Phone #

CR2E034 (10/97)