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).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000043439 (3)

WIRELESS MARKET PLACE, INC.

FILED Jul 29 1998 8:00am Secretary of State



Sulte, Apt. #, etc. Sulte, Apt. #, etc. \$8.75 Additional											
TAMPA FL 3884	Principal Place of Business Mailing Address							·	E LOUISONE ALM TREEL TOOM MENT WORK DOWN ONLY BOUND THAT ALONE SENT	A 1841 COM	
2. Principal Piaco of Business 2a. Mairing Address 2b. Mairing								DO NOT WRITE IN THIS SPACE			
Sullo, Apt #, NG. 20									3. Date Incorporated or Qualified		
Suite, Apt #, etc. 22 23 27 26 27 27 27 27 27 27		lace of Busine	SS	2a. Ma	2a. Mailing Address					d For	
City & State Ci	21			26	26				Applied for Not A	pplicable	
20	Suite, Apt.	#, etc.		· · · · · · · · · · · · · · · · · · ·	· · · · · · · ·						
Zip Country Zip Country Zip Country Remainable Personal Property Tax due June 30 Change Addition		6		City	City & State				6. Election Campaign Financing \$5.00 Ma	y Be	
25 28 30 Personal Property Tax due June 30 Ms No	23		**************************************	28	· • · · · · · · · · · · · · · · · · · ·				Trust Fund Contribution	ees	
10 Name and Address of New Registered Agent		Country			├ ──						
MCEWEN, DAVID B 150 SECOND AVE. N., STE. 1770 ST. PETERSBURG FL 33701 82 Street Address (P.O. Box Number is Not Acceptable) 83 A City FL 85 Zip Code 11. Pursuant to the provisions of socions 607.0502 and 607.1508. Florida Statutes, the above an authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered spent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE Spreakly, typed or pretice range it angitation as trips it spreakly as a company of the corporation's board of directors. I hereby accept the appointment as registered appears and trip at springle. PATE 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11ILE Spreakly, typed or pretice range it angitated agent and trip it springle. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. TILE Spreakly, typed or pretice range it angitated agent and trip it springle. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITYST2P 15. TILE 15. TILE 25. TILE 26. TILE 26. TILE 26. TILE 26.	24			a and code and							
1. Pursuant to the provisions of socions 697 0502 and 697 1508. Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as 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, 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 femilier with, and accept the orbigations of, section 607 0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. TITLE OWETMORE, SCOTT 12. NAME 12. NAME 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. STREET ADDRESS CITY-ST-2IP TITLE ORAGE 23. STREET ADDRESS CITY-ST-2IP TITLE ORAGE 23. STREET ADDRESS CITY-ST-2IP TITLE ORAGE 24. CITY-ST-2IP TITLE ORAGE 24. CITY-ST-2IP TITLE ORAGE 25. STREET ADDRESS 24. CITY-ST-2IP TITLE ORAGE 33. STREET ADDRESS 24. CITY-ST-2IP TITLE ORAGE 34. CITY-ST-2IP TITLE ORAGE 35. STREET ADDRESS 35. STREET AD											
ST. PETERSBURG FL 33701 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorids. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorids. Statutes agent, and accept the obligations of sections 607 0505, Florids Statutes. SIGNATURE SIGNA									occ (P.O. Pov Number is Not Accordable)		
Section Sect							Stieet Addie	1655 (F.O. BUX 14UIIIDGI IS INUL ACCEPTAGE)			
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 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, and familiar with, and accept the obligations of, section 607 0505, Florida Statutes. Interest agent Interest							City	 85 Zip Cod	e		
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 main familiar with, and accept the obligations of section 607.0505, Florida Statutes. SIGNATURE 12.								<u> </u>			
12.	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										
TITLE NAME STREET ADDRESS CITY-STZIP TITLE NAME STREET ADDRESS SACITY-STZIP SACITY-S	SIGNATURE										
TITLE		Signature, typed or	<u> </u>					gent eignature requi			
NAME STREET ADDRESS CITY-ST2IP TITLE DELETE STREET ADDRESS CITY-ST2IP TITLE STREET ADDRESS STRE	<u> </u>	<u> </u>	OFFICERS F	IND DIRECTO	······			г		•	
STREET ADDRESS		_	SCUTT		DELETE				Change L_	Addition	
CITYSTZIP											
TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET	!										
NAME		77 HU1 71 1 E						211	Change	Addition	
STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP								J Orlange		, radinoli	
24 CITY-ST-ZIP					2.3 STREET			ADDRESS			
TITLE					2.4 CF		4 CITY-ST-ZIP		* •		
NAME					DELETE 3.1 TIT		.1 TITLE		Change	Addition	
CITY-ST-ZIP	NAME					3.2 NAME	=		_ · •		
TITLE	STREET ADDRESS					3.3 STREET ADDRESS		ADDRESS			
NAME	CITY-ST-ZIP				3.4 CITY-ST-ZIP			ZIP			
STREET ADDRESS	TITLE				DELETE	4.1 TITLE			Change	Addition	
CITY-ST-ZIP	NAME					4.2 NAME	Ξ				
TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP DELETE 0.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS					4.3 STRE	ET#	ADDRESS			
NAME	CITY-ST-ZIP							ZIP			
STREET ADDRESS	TITLE				DELETE	5.1 TITLE			Change	Addition	
CITY-ST-ZIP	NAME					5.2 NAME	Ξ				
TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP	STREET ADDRESS					5.3 STRE	ETA	ADDRESS			
NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP							_	ZIP			
STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP					L DELETE				Change	Addition	
CITY-ST-ZIP 8.4 CITY-ST-ZIP											
									ion 110 07/3/(i) Florida Statutae I further earlify that the Informati	ion	

indicated on this annual report or surplemental 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 of 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 chapter, or on an attachment with an address.