

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

PROFIT
CORPORATION
ANNUAL REPORT
2001



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90034 031 ***150.00

DOCUMENT # P97000045493

1. Corporation Name

IT'S A WIRELESS WORLD!, INC.

A0062720

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3/6/95

2. Principal Place of Business

21 6278 N. FEDERAL HWY.

2a. Mailing Address

26 6278 N. FEDERAL HWY.

4. FEI Number

65-0559038

Applied For

Not Applicable

Suite, Apt. #, etc.

22 #206

Suite, Apt. #, etc.

27 #206

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 FORT LAUDERDALE, FL

City & State

28 FORT LAUDERDALE, FL

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Zip Country

24 33308

25

BROWARD

Zip Country

29 33308

30

BROWARD

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

JOSEPH K. NOFIL P.A.

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

3284 NORTH STATE ROAD 7

83

84 City

LAUDERDALE LAKES

FL

85 Zip Code

33319

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSTD ☐ DELETE

NAME POTTER, RALPH E.

STREET ADDRESS 6343-1 BAY CLUB DRIVE

CITY-ST-ZIP FORT LAUDERDALE, FL 33308

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

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, with all other like empowered.

SIGNATURE:

[Signature]

4/18/01