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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700050298 (3)
CVI WIRELESS, INC.

FILED May 06 1998 8:00am Secretary of State



						1
Principal Place of Business Mailing Address						
2046 CLAIRE LANE 2846 CLAIRE LANE JACKSONVILLE FL 32223 JACKSONVILLE FL 32223						
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 06/05/1997
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For
21		26	26			59 - 345/3/8 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27	27			Fee Required
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Coun	try		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
<u></u>						10. Name and Address of New Registered Agent
	UMINITI, CARL S		۴	81	Name	
	46 CLAIRE LANE		E	32	Street Addr	ress (P.O. Box Number is Not Acceptable)
JA	CKSONVILLE FL 32223		Ļ			
			}6	B3 [
			6	B4	City	FL 85 Zip Code
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 lamitar with, and doesn't the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE						
	Signature, typed or pulsed name of registered a	 		Ageni	s gnature requir	red when reinstating) DATE
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD CAMINET CARLS	☐ DELET	E 1.1 TITE	E		Change Addition
NAME	CAMINITI, CARL S		1.2 NAM	AE.		
STREET ADDRESS	2846 CLAIRE LANE		1.3 STR	EET AC	DORESS	
CITY-ST-ZIP	JACKSONVILLE FL 32223		1.4 CITY		ZIP	
TITLE	ST CADILITO MAIOENT I	DELET]	Change Addition
NAME	CAPUTO, VINCENT J	hn	2.2 NAM	Æ		
STREET ADDRESS	665 REMINGTON FOREST	UH	2.3 STAI	EET AC	DDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32259		2.4 CfT		- ZiP	
TITLE		☐ DELET	E 3.1 TITU	.E	- 1	☐ Change ☐ Addition
NAME			3.2 NAM	AE.	1	•
STREET ADDRESS			3.3 STR	EET A	DDRESS	
CITY-ST-ZIP	· <u>·</u>		3.4. CITY		-ZIP	
TITLE		☐ DELET	E 4.1 11TL	E		Change Addition
NAME			4. 2 NAM	ME		
STREET ADDRESS			4.3 STRE	EET AC	DDRESS	
CITY-ST-ZIP			4.4 CITY	/-ST-	ZIP	
TITLE		DELET	E 5.1 TITL	E		Change Addition
NAME			5.2 NAM	NE.	ĺ	
STREET ADDRESS			5.3 STR	EET A[DDRESS	•
CITY-ST-ZIP			5.4 CITY	(-ST-	ZIP	
TITLE		☐ DELET	E 61 TITL	E] _	Change Addition
NAME	î.		6.2 NAM	1E		
STREET ADDRESS			6.3 STRE	EET A[DDRESS	
CITY-ST-ZIP			6.4 CITY	/- \$T-	ZIP	
	ertify that the information supplied	with this filing does not qui				Section 119.07(3)(i), Florida Statutes. I further certify that the information

• Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(), Florida statutes. Further certify that the information indicated on this annual report or suppliemental anoval 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.

CICNATURE.

(Netal)

21/18

84-80-4554