

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000054668

1. Entity Name

GULF ATLANTIC WIRELESS, INC.

FILED
Feb 24, 2000 8:00 am
Secretary of State

02-24-2000 90040 026 ***150.00

Principal Place of Business

2805 E. OAKLAND PARK BLVD.
SUITE 427
FT. LAUDERDALE FL 33306

Mailing Address

331 VIA ESPLANADE
PUNTA GORDA FL 33950-6437
US

2. Principal Place of Business

201 WEST MARION AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite 308

City & State

Punta Gorda, FL

Zip

Country

33950

4. FEI Number

65-0762495

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GLASSMAN, H.W. II
2805 E. OAKLAND PARK BLVD.
SUITE 427
FT. LAUDERDALE FL 33306

Name

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

City

FL

Zip Code

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

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS GLASSMAN, H.W. II
CITY-ST-ZIP 2805 E. OAKLAND PARK BLVD., SUITE 427
FT. LAUDERDALE FL 33306

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 821 EAST COMMERCIAL BLVD.
CITY-ST-ZIP Ft. Lauderdale, FL 33324

TITLE ☐ Delete
NAME D
STREET ADDRESS MINKINA, EDWARD
CITY-ST-ZIP 2805 E. OAKLAND PARK BLVD., SUITE 427
FT. LAUDERDALE FL 33306

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 201 WEST MARION AVE, Suite 308
CITY-ST-ZIP Punta Gorda, FL 33950

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Edward S. Minkina Edward Minkina

SIGNATURE AND OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(941) 629-7228

Date

Daytime Phone #

CR2E034 (9/99)