

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000058737

FILED  
Apr 11, 2002 8:00 AM  
Secretary of State

Entity Name: AMA WIRELESS SPECIALISTS, INC.

## Current Principal Place of Business:

4060 SW 30TH AVENUE  
FORT LAUDERDALE, FL 33312

## New Principal Place of Business:

## Current Mailing Address:

16541 ROYAL POINCIANA DRIVE  
WESTON, FL 33326

## New Mailing Address:

FEI Number: 65-0770011

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEVINSON, PAUL  
16541 ROYAL POINCIANA DRIVE  
WESTON, FL 33326 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: OLNOWICH, ANNA  
Address: 2400 W 84 ST, STE 6  
City-St-Zip: HIALEAH, FL 33016

Title: VTD ( ) Delete  
Name: LEVINSON, PAUL  
Address: 2400 W 84 ST, STE 6  
City-St-Zip: HIALEAH, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: OLNOWICH, ANNA  
Address: 16541 ROYAL POINCIANA DR  
City-St-Zip: WESTON, FL 33326

Title: VTD (X) Change ( ) Addition  
Name: LEVINSON, PAUL  
Address: 16541 ROYAL POINCIANA DR  
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL LEVINSON

VP

04/11/2002

Electronic Signature of Signing Officer or Director

Date