

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

FILED
Jun 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **TEC ATLANTIC WIRELESS & COMMUNICATIONS, INC.**

P97000065593

Principal Place of Business: **11350 METRO PKWY #103 FT MYERS, FL 33912**

2. Principal Place of Business:
21 **11350 METRO PKWY**
Suite, Apt. #, etc.
22 **#103**
City & State
23 **FT MYERS FL**
Zip
24 **33912**

2a. Mailing Address:
26 **SAME**
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30 **USA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **7-29-97**
4. FEI Number: **05-0774317**
Applied For: ☐ Not Applicable
5. Certificate of Status Desired: ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing: ☐ **\$5.00 May Be Added to Fees**
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: ☐ Yes ☒ No

8. Name and Address of Current Registered Agent

**CAROLANN AUSTIN SWANSON, P.A.
12601 WORLD PLAZA UNIT 2
FT MYERS, FL 33907**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0102 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: _____ (Print Name of Agent or Agent Representative, if Agent Representative)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
PRESIDENT	TIFFANY WHITMAN	15750 CATALPA COVE DR.	FT MYERS, FL 33908	☐
				☐
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE	Change	Addition
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐

14. I hereby certify that the information supplied on this report does not qualify for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information indicated on this report is true and correct to the best of my knowledge and belief 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 person or persons authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE: **TIFFANY WHITMAN**

4-30-98 633-2700

CR2E034 (10/97)