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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700081901 (5)

FILED
May 11 1998 8:00am
Secretary of State

HOMESTEAD WIRELESS, INC. Principal Place of Business Mailing Address C/O JONATHAN H. GREEN & ASSOCIATES. P.A. 799 BRICKELL PLAZA SUITE 700 MIAMI FL 33131-2816 C/O JONATHAN H. GREEN & ASSOCIATES. P.A. 799 BRICKELL PLAZA SUITE 700 DO NOT WRITE IN THIS SPACE MIAMI FL 33131-2816 3. Date Incorporated or Qualified 09/22/1997 2. Principal Place of Business 2a, Mailing Address Applied For FEI Number 65-07857 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etq. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6, Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Zip ZiD Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 *GREEN, JONATHAN H James M. Guest, P.A. C/O JONATHAN H. GREEN & ASSOCIATES, P.A. Street Address (P.O. Box Number is Not Acceptable) 15600 S.W. 288th St., #310 **B2** 799 BRICKELL PLAZA SUITE 700 83 MIAMI FL 33131-2816 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 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. m. Guera JAMES SIGNATURE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition DELETE President TITLE 1.1 TITLE Change GREEN, JONATHAN H 1.2 NAME NAME 29949 S. Frederal Historia 799 BRICKELL PLAZA SUITE 700 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33131-2818 HOMESTERD FLORIDA 336 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS FL 33031 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE 4. 2 NAME 244015 is 182 rd Que STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change 6.1 TITLE Addition TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS CITY ST ZIP

14. Thereby 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 of supplicmental 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 of the receiver of truster amowered 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 attroup untraint of address.

SIGNATURE:

Roy F. Yorrs Jr

4-13-98

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