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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90051 032 ***150 00

| • | 1999 | Go we of | DIVISION OF COF | RPORATI | ONS | 03-11-1999 90051 0 | 32 ***150.00 | |
|---|---|------------------------------------|------------------------|---------------|-----------------|---|---|--|
| i. Corporation | MENT # P97 DUNTAIN WIRELES | | 926 | | |) (menaé) ((# 1811) (##) 8#)) ##) ##) ##) | 13 :81/9 11818 (21/8 1/8)E 9/(108) | |
| | | | | | | | | |
| Principal Place of Business Mailing Address | | | | | | | | |
| 1245 W. FAIRBANKS. STE. 380 1245 W. FAIRBANKS. STE. 380 WINTER PARK FL 32789-4878 WINTER PARK FL 32789-4878 | | | |) | | DO NOT WRITE IN TH | IS SPACE | |
| | | | | | | 3. Date Incorporated or Qualifed 10/28/1997 | | |
| 2. Principal Pl | ace of Business | 2a. M | 2a. Mailing Address 26 | | | 4. FEI Number 59-3476640 | Applied For Not Applicable | |
| Suite, Apt. #, etc. | | 27 St | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & Stat | е | 28 | ity & State | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip 24 | Country 25 | Zi 29 | Zip Country 30 | | | 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No | | |
| • | 9. Name and Address | s of Current Register | ed Agent | | | 10. Name and Address of New Registere | d Agent | |
| | . 00011400 1 10 | | | 81 | Name | | | |
| 1245 | a, richard L Jr. 5 W. Fairbanks, ste. | | | | Street Ad | Street Address (P.O. Box Number is Not Acceptable) | | |
| WINTER PARK FL 32789-4878 | | | | | | | | |
| | | | | 84 | City | F | | |
| office or r | to the provisions of Section egistered agent, or both, i m familiar with, and accep | n the State of Florida | Such change was autho | onzea ov | the corpora | orporation submits this statement for the purpose ation's board of directors. I hereby accept the app | of changing its registered ointment as registered | |
| SIGNATURE | Signature, typed or printed name of | f registered agent and title if ap | plicable. (NOTE: Reg | gistered Ager | t signature req | uired when reinstating) DATE | | |
| 12. OFFICERS AND DIRECTORS 13 | | | | 13. | | ADDITIONS/CHANGES TO OFFICERS | | |
| TITLE | D DELETE 1. | | 1.1 TITLE | | | ☐ Change ☐ Addition | | |
| NAME VEGA, RICHARD L 12 | | | 1.2 NAME | | | | | |
| STREET ADDRESS 1245 W. FAIRBANKS, STE. 380 | | | | 1.3 STREET | ADORESS | | | |
| | | | | 1.4 CITY-S | Γ-ZIP | | | |
| TITLE | | ···· | ☐ DELETE | 2.1 TITLE | | | ☐ Change ☐ Addition | |
| NAME | | | | 2.2 NAME | 1 | | } | |

2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP [] Change Addition ☐ DELETE 41 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRES 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information exposed 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 supplemental 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 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 18 if changed, or on an attactment with an address, with all other like empowered.

SIGNATURE IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR