

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 12, 2002 8:00 am**  
**Secretary of State**

09-12-2002 90085 030 \*\*\*150.00

**DOCUMENT # P98000031576**

1. Entity Name

**WIRELESS COMMUNICATIONS PLUS INC.**

Principal Place of Business

**2441 S.W. HALISSEE STREET  
 POET ST. LUCIE FL 34953**

Mailing Address

**2441 S.W. HALISSEE STREET  
 POET ST. LUCIE FL 34953**

2. Principal Place of Business

**378 SE Port St. Lucie Blvd**

Suite, Apt. #, etc.

3. Mailing Address

**378 SE Port St. Lucie Blvd**

Suite, Apt. #, etc.

City & State

**Port St. Lucie, FLORIDA**

City & State

**Port St. Lucie, FLORIDA**

Zip

**34984**

Country

**USA**

Zip

**34984**

Country

**USA**

4. FEI Number

**65-0823799**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**SINGH, LYNETTE**

**2441 S.W. HALISSEE STREET  
 POET ST. LUCIE FL 34953**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00  
 After September 13, 2002 Fee will be \$750.00  
 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 **D** ☐ Delete  
 NAME **SINGH, LYNETTE**  
 STREET ADDRESS **90-49 186 STREET**  
 CITY-ST-ZIP **HOLLIS NY 11423**

TITLE ☐ Change ☐ Addition  
 NAME **LYNETTE SINGH**  
 STREET ADDRESS **378 SE Port St. Lucie Blvd**  
 CITY-ST-ZIP **Port St. Lucie, FL 34984**

TITLE **D** ☐ Delete  
 NAME **SINGH, RAMSARRAN**  
 STREET ADDRESS **90-49 186 STREET**  
 CITY-ST-ZIP **HOLLIS NY 11423**

TITLE ☐ Change ☐ Addition  
 NAME **RAMSARRAN SINGH**  
 STREET ADDRESS **378 SE Port St. Lucie Blvd**  
 CITY-ST-ZIP **Port St. Lucie FL 34984**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
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TITLE ☐ Change ☐ Addition  
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 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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8/5/02**

Date

**561-201-6783**

Daytime Phone #

CR2E034 (4/02)

Attachment  
125420

378 SE PORT ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34952

## Wireless Communication Plus

August 5, 2002


Florida Department of State Division Corporation

Re: Reference # P8000031765

To whom this may concern.

I recently received a notice from you stating that I didn't file my 2002 Business Uniform Report. The reason for not filing this report, is I did not receive a notice from you. I have several corporations, and as your records indicate they were all filed on time. Is there anyway possible to have the late fees & penalties waived? I would greatly appreciate it. Please also change our mailing address. The correct address is: 378 SE Port St. Lucie Blvd. Port St. Lucie, FL 34952. Thank You. If you have any questions please contact me at 772-335-3636. Enclosed is a renewal fee.

Sincerely,

  
David Singh  
General Manager  
Wireless Communications Plus