

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$500 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$700).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P48000065409

1. Corporation Name

CELLULAR US, INC.

Principal Place of Business

13451 SW 101 Lanes
Miami, FL. 33186

Mailing Address

13451 SW 101 Lane
MIAMI, FL. 33186

2. Principal Place of Business

2a. Mailing Address

2b. Suite, Apt. #, etc.

2c. Suite, Apt. #, etc.

2d. City & State

2e. City & State

2f. Zip

2g. Country

2h. Zip

2i. Country

3. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

7/23/98

4. FEI Number

65-0864942

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. This corporation owes the current year
Intangible Personal Property

☐

Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

9083 SW 133 Place

83.

84. City

Miami

FL

85. Zip Code

33186

11. Pursuant to the provisions of sections 607.0582 and 607.1506, 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

Signature typed or printed name of registered agent and his telephone

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. I hereby certify that the information supplied on this filing does not qualify for the exemption stated in section 119.07(3)(b), Florida Statutes, I further certify that the information created on this annual report or 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 13 if changed, or on an attachment with an address.

15. SIGNATURE

16. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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FILED

99 SEP -2 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2034 (5/99)

KE

CELLULAR USA, INC.
13451 S.W. 101 Lane
Miami, Florida 33186

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August 27th, 1999

FLORIDA DEPARTMENT OF STATE
Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

Reinstatement Division

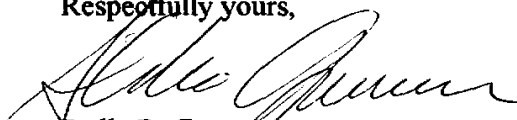
Re: Cellular USA, Inc.

Dear Secretary of State:

I request for your Department to consider, a wave of all late fees and or penalties for filling late our 1999 "Annual Report" due to non-receiving form at above-mentioned address. I can assure you that this incident will not happen again and now am aware that it is my responsibility to call your Department and request the form if not received on time.

Wishing, you consider my request.

Respectfully yours,


Stella R. Guevara
President