FILED Sep 08, 2003 8:00 am Secretary of State

2003	FOR	PROFIT	CORPOR	ATION.
UNIFO	RM I	BUSINES	S REPOR	T (UBR)

UNIFORM BUSINE	SS REPORT	(UBR)			iy oi S	
DOCUMENT # P980000943 1. Entity Name PCS WIRELESS OF FLORIDA INC.	323	L		09-08-2003 9	0315 028 ***	150.00
Principal Place of Business 4424 WEST KENNEDY BOULEVARD TAMPA, FL 33609	JLEVARD			•		
2. Principal Place of Business 4349 CWN HCHWAY Suite. Apt. #, etc.	3. Mailing Address C/O KOEH Suite, Apt. #, etc.	LER & CO.		•		
	1611 W. P	LATT ST.		HECK HERE IF M.		
TAMPA FL	City & State TAMPA	FL	4. FEI Number 5!	9-3540496	⊢+ −-	plied For at Applicable
Zip Country 33624 USA	^{Zip} 33606	Country	5. Certificate of St		\$8.75 Add Fee Require	
6. Name and Address of Current	Registered Agent	Name 1	7. Name and Add			
LARSON, JAMES L 733 CRUISEVIEW DRIVE TAMPA, FL 33602		KE	(P.O. Box Number Is I	OEHLER Vol Acceptable)	Z PA.	
		1611	(A) PIA	77 CT	// 	·
		City T	m 00_	-1 1	FL Zip Coo	7 nc
8. The above named entity submits this statement to	r the purpose of changing its r	egistered office or regist	ered agent, or both, in	the State of Florida		and accept
the obligations of registered agent. SIGNATURE Signature, synettri (hinded name of expissared agent.	and time if any ligation. (NOTE:	Registered Agent zignature requi	OA-	9/3	3/03	
FILE NOWILL FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Amended UBR Is \$61.25 Make Check Payable to Florida Department	0 of State			Campaign Financi		O May Be of to Fees
10. OFFICERS AND	COMPRESENTATION	11	ADDITIONS/CHA	NGES TO OFFICER	S AND DIRECTOR	S IN 11
TITLE MR LARSON, JAMES L LARSON, JAMES L	☐ Delete	TITLE NAME	-		☐ Change	Addition
STREET ADDRESS 733 CRUISEVIEW DRIVE CITY-ST-2P TAMPA, FL 33602		STREET ADDRESS City-St-21P				
TITLE NAME STREET ADDRESS	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS	☐ Delete	TITLE NAME STREET ADDRESS			Change	Addition
CITY-ST-ZP		CITY-ST-ZIP				<u></u>
TIDLE NAME STREET ADDRESS CITY-ST-ZP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME	Delete	TITLE NAME		<u> </u>	Change	Addition
STREET ADDRESS CITY-ST-2P		STREET ADDRESS Crty-St-Zip				
TITLE NAME STREET ADDRESS CITY-ST-2P	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Change	Addition
12. I hereby certify that the information supplied with indicated on this report or supplemental report of the corporation or the receiver of trustee; eypochanged, or on an attachment with an apoless,	ś tru ż and accurate and that m	the exemption stated in the stated in the stated in the state of the s	Section 119.07(3)(i), Fig.	f made under oath:	her certify that the i	nformation

Affachment-

KOEHLER & COMPANY

A PROFESSIONAL ASSOCIATION

CERTIFIED PUBLIC ACCOUNTANTS AND BUSINESS ADVISORS# P9800094323

MEMBERS OF THE AMERICAN INSTITUTE AND THE FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS TELEPHONE (813) 258-1272 FACSIMILE (813) 258-2422 WEB SITE: WWW.CPA-TAMPA.COM E-MAIL: KOEHLER@CPA-TAMPA.COM

September 4, 2003

Florida Department of State Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Regarding: PCS Wireless of Florida, Inc.

To Whom it May Concern:

Enclosed please find a check payable to the Department of State for \$150.00 and Form 2003 Uniform Business Report for the above referenced corporation.

Please be advised that the above referenced corporation **never** received the original annual report or the second report and accordingly, should not be subject to the late fee. This statement should be sufficient to allow you to waive this late fee.

If you have any questions, please call me directly at (813) 258-1272.

Very Truly Yours,

Keith W. Koehler