## PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED May 08, 1999 8:00 am Secretary of State

05-08-1999 90038 044 \*\*\*150.00

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DOCUMENT. # P98000101550 IN TOUCH WIRELESS COMMUNICATIONS, INC.												
Principal Place	e of Business		Malling Add	ress				STIEDL Jem ibser cerci messe	FAILE MOINT TIMES I	ierāt lissi atiet a	1114 2414 6981	
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Margate FL 33	3063		MARGATE FL	33063				DO NOT W	RITE IN THIS	SPACE		
							3. Date II	ncorporated or Qualif	ed			
2 Principal P	Nace of Queiners		2a. Mailing /	Addresa			4. FEI Nu	ımber		Ap	plied For	
2. Principal Place of Business 21			26				65-	0882120	<u> </u>	No	t Applicable	
	Suite, Apt. #, etc.			Suite, Apt. #, etc.				ate of Status Desired		\$8.75		
22			27				3. 0011110			Fee Re	<del></del>	
- City & State			City & State					6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution  \$5.00 May Be Added to Fees				
Zip		Country	Zip		Country	У		orporation owes the o	urrent year in			
24	25		29		30			nal Property Tax. and Address of Ne	w Pagintered		□No □	
	9. Name and	Address of Current	t Registered Age	ent	81	Name	it. dame	AIN AUGISES CI IN	e itagistere	1190.10	_	
HENN	NIGS, GABRIEL				82	<u> </u>		N b in blad flow	-1-1-1-1	·	i	
880 SW 22ND ST							Street Address (P.O. Box Numb		iptable)			
BOCA	a raton fl 3:	3486			83	9						
					84	9 City				85 Zip (	ode	
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11. Pursuant	to the provisions	of Sections 607,0502 or both in the State of	2 and 607.1508, i	Florida Statutes hange was aut	s, the above	re-named c	corporation submi	ts this statement for t directors. I hereby ac	he purpose o cept the appo	r changing its Antment as re	gistered	
11. Pursuant office or r agent. I a	t to the provisions registered egent, am familiar with a	of Sections 607,0502 or both in the State of and seept the obligat	2 and 607.1508, i of Florida. Such o tions of, Section 6	Florida Statutes change was aut 807.0505, Florid	s, the above thorized by da Statute:	ve-named co y the corpor s.	corporation submi ration's board of	ts this statement for t directors. I hereby ac	the purpose of cept the appo	r changing its pintment as re	gistered	
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14. I hereby certify that the information supplied with this filling 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 or supplemental angual 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 precise 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 or an attack for with an abdress, with all other like empowered.

SIGNATURE:

AND THE OF PRINTED HAME OF SKINNING OFFICER OR DIRECTOR

1-1/00

Daytime Phone #