


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

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May 06, 1999 8:00 am  
Secretary of State

05-06-1999 90272 044 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000105128

1. Corporation Name  
~~CONTACT WIRELESS, INC.~~  
CONTACT

Principal Place of Business 9529 S.W. 154TH AVENUE MIAMI FL 33196 8150 S.W. 8 St. Miami, Fl., 33144	Mailing Address <del>9529 S.W. 154TH AVENUE</del> <del>MIAMI FL 33196</del> 8150 S.W. 8th Street Miami, Fl., 33144
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 12/18/1998 4. FEI Number 65-088333 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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9. Name and Address of Current Registered Agent GUTIERREZ, JOSE M 9529 S.W. 154TH AVENUE MIAMI FL 33196	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 *Jose Manuel Gutierrez* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD NAME CARDONA, EDGAR S STREET ADDRESS <del>9529 S.W. 154TH AVENUE</del> CITY-ST-ZIP MIAMI FL 33196	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 8150 SW 8 Street 1.4 CITY-ST-ZIP Miami, FL, 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: *Edgar S. Cardona* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/14/99 Date Daytime Phone #

CR2E034 (11/98)