2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Jan 26, 2001 8:00 am DOCUMENT # P99000018134 **Secretary of State** 1. Entity Name SIMPLY WIRELESS USA, INC. 01-26-2001 90126 007 ***150.00 Principal Place of Business Mailing Address 2615 HIATUS ROAD 2015 HIATUS ROAD -GOOPER CITY-FL 99026 unnilgåå COOPER CITY FL 33020 Principal Place of Business 3 Mailing Address 7558 W. COMMERCIAL BLVD. 558 W. COMMERCIAL Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0899675 FLORIDA AUDERHILL FLORIDA Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MISCH, ERIC 2615 HIATUS RD HOLLYWOOD FL 33026 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 Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PSTD **PSTD** Change TITLE Delete TITLE MÍSCH ERIC R. 1558 W. COMMERCIAL BLVD. MISCH, ERIC R NAME NAME **2615 HIATUS ROAD** STREET ADDRESS STREET ADDRESS LANDERHILL FL 33319 CITY-ST-7IP CITY-ST-ZIP COOPER CITY FL 33026 ☐ Change Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7IP ☐ Delete Change TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR