

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State
 04-25-2001 90110 044 ***150.00

DOCUMENT # P99000064635

1. Entity Name
JUST FOR CELLULAR, INC.

Principal Place of Business Mailing Address
JUST FOR CELLULAR **JUST FOR CELLULAR**
3980 W 16 AVE **3980 W 16 AVE**
HIALEAH FL ~~33013~~ **HIALEAH FL ~~99013~~**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **65-0935024** Applied For
 Not Applicable

Zip Country Zip Country
33012-7000 **33012-7000**

5. Certificate of Status Desired ☐ \$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GONZALEZ, ANAMIN
5125 E 8TH LANE
HIALEAH FL ~~33013~~

Name **Gonzalez, Anamin**
 Street Address (P.O. Box Number is Not Acceptable)
3980 NW 16 Ave
 City **Hialeah** FL **33012-7000**

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 *[Signature]* **ANAMIN GONZALEZ** **4-20-01**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **PD**
 STREET ADDRESS **GONZALEZ, ANAMIN**
 CITY-ST-ZIP **5125 E 8TH LANE**
HIALEAH FL ~~33013~~

TITLE ☒ Change ☐ Addition
 NAME **PD**
 STREET ADDRESS **GONZALEZ, ANAMIN**
 CITY-ST-ZIP **3980 W 16 Ave**
Hialeah FL 33012-7000

TITLE ☐ Delete
 NAME **VD**
 STREET ADDRESS **LALANI, ELIZABETH G**
 CITY-ST-ZIP **5125 E 8TH LANE**
HIALEAH FL ~~33013~~

TITLE ☒ Change ☐ Addition
 NAME **VD**
 STREET ADDRESS **LALANI, ELIZABETH G.**
 CITY-ST-ZIP **3980 W 16 Ave**
Hialeah FL 33012-7000

TITLE ☐ Delete
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 CITY-ST-ZIP

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 STREET ADDRESS
 CITY-ST-ZIP

13. 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 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: *[Signature]* **ANAMIN GONZALEZ P.D** **2-15-01 305 826-3172**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)