

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 07, 2001 8:00 am
Secretary of State

06-07-2001 90193 049 ***150.00

DOCUMENT # P99000080735

1. Entity Name

POWER PAGE WIRELESS INC.

Principal Place of Business

Mailing Address

1808 MAIN ST.
DUNEDIN FL 34698

1808 MAIN ST.
DUNEDIN FL 34698

2. Principal Place of Business

3166 Tampa Rd.

Suite, Apt. #, etc.

3. Mailing Address

3166 Tampa Rd.

Suite, Apt. #, etc.

City & State

Oldsmar, Florida

City & State

Oldsmar, Florida

Zip

34677

Country

United States

Zip

34677

Country

United States

4. FEI Number

59-3598237

Applied For

Not Applicable

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

SCERBO, SCOTT A
1808 MAIN ST.
DUNEDIN FL 34698

Name

Matthew B. McCollom

Street Address (P.O. Box Number is Not Acceptable)

3166 Tampa Rd.

City

Oldsmar

FL

Zip Code

34677

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 **Matthew B. McCollom**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

01-05-01

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

TITLE ☒ Delete
NAME **SCERBO, SCOTT A**
STREET ADDRESS **1808 MAIN ST**
CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **SCERBO, SCOTT A**
CITY-ST-ZIP **1808 MAIN ST**
DUNEDIN FL 34698

TITLE ☒ Delete
NAME **PSVT**
STREET ADDRESS **Matthew B. McCollom**
CITY-ST-ZIP **3166 Tampa Rd.**
Oldsmar FL 34677

TITLE ☒ Delete
NAME **PSVT**
STREET ADDRESS **Matthew B. McCollom**
CITY-ST-ZIP

TITLE ☐ Delete
NAME **PSVT**
STREET ADDRESS **SCERBO, Scott A**
CITY-ST-ZIP **3166 Tampa Rd**
Oldsmar FL 34677

TITLE ☐ Delete
NAME **PSVT**
STREET ADDRESS **McCollom, Matthew B**
CITY-ST-ZIP **3166 Tampa Rd.**
Oldsmar FL 34677

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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: **Matthew B. McCollom**

Matthew B. McCollom

01-05-01

727-742-9744

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)