2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P99000084592** Jul 12, 2000 8:00 am Secrétary of State NAC WIRELESS CORP. 07-12-2000 90015 017 ***150.00 Principal Place of Business Mailing Address 7284 SW 40TH STREET 7284 SW 40TH STREET MIAMI FL 33155 MIAMI FL 33155 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SILVILLA. ERNESTO Street Address (P.O. Box Number is Not Acceptable) 3000 SW 110TH AVE. **MIAMI FL 33165** Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. 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 11. 12. Change ☐ Addition Delete TITLE SIVILLA, ERNESTO NAME NAME 3000 SW 110TH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33165** ☐ Addition STD Change ☐ Delete TITLE NAME SIVILLA. MARIA NAME STREET ADDRESS 3000 SW 110TH AVE STREET ADDRESS CITY = ST=ZIP CITY-ST-ZiP-MIAMI FL^33165 □ Addition TITLE TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C/TY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/00 (305) 595-2337

Attachment 0# pagowo 84592 DW 69716

July 7, 2000

Department of State Division of Corporation Tallahassee, Fl

Ref: Doc P99000084592

We are enclosing a check for \$150.00 for the renewal fees for **NAC WIRELESS**. We did not get the form to file on time, and by the time we got the form from the State it was late. Thank you,

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Ernesto Sivilla

President

7284 SW 40th Street

Miami Florida 33155