

2001 UNIFORM BUSINESS REPORT (UBR) - 01
2000 UNIFORM BUSINESS REPORT (UBR)

102

DOCUMENT # P99000084954

1. Entity Name
COYOTE & ROADRUNNER WIRELESS, INC.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

01 JAN 22 PM 3:09

Principal Place of Business Mailing Address
 4771 NW 167 STREET 4771 NW 167 STREET
 HIALEAH FL 33016 HIALEAH FL 33016



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

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

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For
 05-0953432 Not Applicable

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

6. Name and Address of Current Registered Agent

RAMIREZ, ELSA
 17200 NW 52 CT.
 CAROL CITY FL 33055

7. Name and Address of New Registered Agent

Name

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

City FL Zip Code

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 _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

000000018346--9
 -02/01/01--01010--004
 ***300.00 ***300.00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PST	RAMIREZ, ELSA	17200 NW 52 CT.	CAROL CITY FL 33055	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 supplement to this 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 the empowe... 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 address, with other like empowered.

SIGNATURE: *[Signature]* Date: 12/14/00 Daytime Phone #: (305) 678-1448

SIGNATURE AND TYPE ME OF SIGN OFFICER OR DIRECTOR

CR2E034 (5/00)

AD

208

Dated: November 8, 2000

To: Division of Corporations

From: Coyote & Roadrunner Wireless, Inc.

Ref.: 2000 Uniform Business Report

I am sorry if this is an inconvenience but I just recently was given my second notice for the 2000 Uniform Business Report from my neighbor. Apparently the form was left in his mailbox and he did not give it as much importance as it should have gotten. I also never received the 1st notice. Along with this letter is the completed form with the \$150.00 fee.

Thank You for your understanding,


Elsa Ramirez

President