2000 UNIFORM BUSINESS REPORT (UBB) DOCUMENT # P99000106422 P99000106422 1. Entity Name FILED WIRELESS CONNECTION CORP. 00 AUG -3 PM 3:54 Principal Place of Business Mailing Address SECRETARY OF STATE 587 EAST SAMPLE ROAD 587 EAST SAMPLE ROAD POMPANO BEACH FL 33064 POMPANO BEACH FL 33064 TALLAHASSEE, FLORIDA 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0949592 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE - CORAL GABLES FL: 33134 Zip Code City 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 INOTE: Registered Agent pigneture required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its intangible \$5.00 May Be Election Campaign Financing 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 12. 11. ☐ Detete TITLE Change TITLE PLUMMER, BARBARA NAME NAME STREET ADDRESS **587 EAST SAMPLE ROAD** STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP POMPANO BEACH FL 33064 Change Addition 1,000 Delete TITLE HUNTLEY, REGINA NAME NAME STREET ADORESS STREET ADDRESS **587 EAST SAMPLE ROAD** CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33064 TITLE Delete TITLE (Change Addition BRADWELL RICKEY NAME NAME STREET ADDRESS 587 EAST SAMPLE ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33064 ☐ Addition Change Oelete TITLE TITLE

13. I hereby certify that the information supplied with this filting 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this peport as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 if the performance of the component of the performance of the pe

NAME Street address

TITLE

NAME STREET ADDRESS

TITLE NAME

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS City-St-Zip

SIGNATURE:

NAME

TITLE NAME

TITLE

NAME STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-ZIP

SALES AND TYPES ON PRINTED HASE OF SIGNING DEPICES OF DIRECTO

Delete

Delete

7/12/00 188-513

Change

Change

Addition

☐ Addition

August 1, 2000

Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

Dear Sir or Madam:

On September, 22, 1999, Wireless Connection was registered with the state. At that time, we were not open. I was just trying to put things in place. When I received my certificate, a letter came with it saying I must renewed every five years between July 1st and December 31st of the expiration year.

The next communication I received was July 10, 2000, that said second notice. I called and explained to Robert that the shop didn't open until late January. I never received the first notice. He recommended that I send the \$150.00 in. I did within two days.

Thank you in advance for your immediate attention in this matter.

Sincerely,

Barbara plummer

Wireless Connection Corp.

#P99000106422