FROM : FAX NO. :

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90437 015 ***150.00

DOCUMENT # P99000106422 ✓

1. Entity Name

Wireless Connection Corp.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
587 East Sample Rd.
Suite, Apt. #, etc.
City & State
Pompano Beach, FL
Zip 33064 Country USA

3. Mailing Address
587 East Sample Rd.
Suite, Apt. #, etc.
City & State
Pompano Beach, FL
Zip 33064 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0949592
Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name
Joseph K. Nofil, PA
Street Address (P.O. Box Number is Not Acceptable)
3284 N. State Rd. 7
City Lauderdale Lakes FL Zip Code 33319

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] (Corporate Registered Agent signature required when reinstating) DATE 4/25/02

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

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	PD
NAME	Barbara Plummer
STREET ADDRESS	587 East Sample Road
CITY-ST-ZIP	Pompano Beach, FL 33064
TITLE	STD
NAME	Rickey Bradwell
STREET ADDRESS	587 East Sample Road
CITY-ST-ZIP	Pompano Beach FL 33064

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 4/30/02
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034B (12/01)