FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

 PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V42500**

COLITA					
300111	FLORIDA MOBILITY, INC.				
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· '	ce of Business	Mailing Address			
	ND PARK, BLVD	830 É ÓAKLAND PARK BLVI	, ,		•
SUITE 110 SUITE 110 FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33334			DO NOT WRITE IN	TUIC CDACE	
FI ENOBERIDALE TE 00004			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
				06/10/1992	
2. Principal I	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0337655	Not Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	•	27		5. Certifcate of Status Desired	Fee Required
City & Sta	ite	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	ar Intangible
24	25		30	Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registe	ered Agent
RRI	ITON, CAREY J.		81 Name		. 1
SOURT	E-OAKLAND PK., BLVD., SUITE 1	10	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	LAUDERDLAE FL 33334		<i>j</i>	a a famo constitution en en entre en entre	igns (power woman within Institution of the
;	DIODERDENE I E 00007		83		
	•		84 City	1. 3 1 8 1 8 1 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85 Zip Code
<u> (4) 1 0.00 0</u>	on the the loss of	2 - 5 Sp., exter - 1, sc			
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Statutes Florida: Such change was aut	the above-named corp	poration submits this statement for the purpos	se of changing its registered
11. Pursuant office or agent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligation	and 607.1508, Florida Statutes Florida: Such change was aut ons of, Section 607.0505, Florid	the above-named corp	poration submits this statement for the purposion's board of directors. I hereby accept the a	e of changing its registered ppointment as registered
11. Pursuant office or agent. Fa	am tamiliar with, and accept the obligatio	ons of, Section 607.0505, Florid	s, the above-named corp horized by the corporation da Statutes.		
SIGNATURE	Signature, typed or printed name of registered agent a	ons of, Section 607.0505, Florid	s, the above-named corp horized by the corporation a Statutes.	ad when reinstating) DAT	E
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14. 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 annual report or supplemental annual 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 12 or Block 13 if charged, or on an adaptment with an address, with all other like empowered. with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

954-566-5073

FILED

Jan 26, 1999 8:00am

Secretary of State

01-26-1999 90057 010 ***150.00