

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Monrham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 17 PM 12:06

DOCUMENT # V70919 (8)

1. Corporation Name

AMERICAN TELECOM CELLULAR, INC.

Principal Place of Business

103 SOUTH BISCAYNE BLVD., #103
MIAMI FL 33131

Mailing Address

103 SOUTH BISCAYNE BLVD., #103
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/14/1992

3a. Date of Last Report

04/21/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

65-0362890

Applied For

Not Applicable

Suite, Apt. #, etc

22

Suite, Apt. #, etc

27

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24

Country

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

CUNHA, MARCELO

103 SOUTH BISCAYNE BLVD., #103

MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of person or corporation authorized to register agent and the change of office)

(Signature of Registered Agent. Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

1.1 NAME
D
CUNHA, MARCELO
1.2 STREET ADDRESS
103 SOUTH BISCAYNE BLVD., #103
1.3 CITY, ST, ZIP
MIAMI FL 33131

1.4 TITLE

1.5 NAME

1.6 STREET ADDRESS

1.7 CITY, ST, ZIP

1.8 TITLE

1.9 NAME

1.10 STREET ADDRESS

1.11 CITY, ST, ZIP

1.12 TITLE

1.13 NAME

1.14 STREET ADDRESS

1.15 CITY, ST, ZIP

1.16 TITLE

1.17 NAME

1.18 STREET ADDRESS

1.19 CITY, ST, ZIP

1.20 TITLE

1.21 NAME

1.22 STREET ADDRESS

1.23 CITY, ST, ZIP

1.24 TITLE

1.25 NAME

1.26 STREET ADDRESS

1.27 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

1.5 TITLE

1.6 NAME

1.7 STREET ADDRESS

1.8 CITY, ST, ZIP

1.9 TITLE

1.10 NAME

1.11 STREET ADDRESS

1.12 CITY, ST, ZIP

1.13 TITLE

1.14 NAME

1.15 STREET ADDRESS

1.16 CITY, ST, ZIP

1.17 TITLE

1.18 NAME

1.19 STREET ADDRESS

1.20 CITY, ST, ZIP

1.21 TITLE

1.22 NAME

1.23 STREET ADDRESS

1.24 CITY, ST, ZIP

1.25 TITLE

1.26 NAME

1.27 STREET ADDRESS

1.28 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and deemed truly for the exemption stated in Section 110.07(6)(b), 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 changed, or on an attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/95
Date

(305) 374-3344
Telephone Number