2005 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Mar 07, 2005 08:00 AM **Secretary of State** DOCUMENT # F99000004261 1. Entity Name NEXT TELECOMMUNICATION, INC. Mailing Address Principal Place of Business 100 N BISCAYNE BLVD 100 N BISCAYNE BLVD 2400 MIAMI, FL 33132 MIAMI, FL 33132 No Chg-P CR2E034 (10/03) 03042005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-2082250 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent YEOSHOVA, EPHRAIM DO NOT WRITE 100 N. BISCAYNE BLVD. IN THIS SPACE #2400 MIAMI, FL 33132 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MEIMOUN, ARIK NAME U00000252672 03/07/05-80004-014 150.00 100 N. BISCAYNE BLVD., #2400 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33132 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP

12. Thereby certify that the information supplied with this filling 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 his report as required by Chapter 607. Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like physowered.

SIGNATURE: .

TITLE MAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR

Davume Phone #