2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2008 8:00 am Secretary of State

| DOCUMENT # P07000077671 1. Entity Name SIGNAL TELECOMMUNICATIONS, INC. | | | | | | 04-24-2008 | 90108 039 ***150 | 0.00 |
|--|---|----------------------------------|-----------------------|--|--------------------------------|-------------------------|--------------------------------|------------------------|
| Principal Plac | e of Business | Mailing Address | Mailing Address | | | • • • | | |
| 12461 SW 130 STREET | | 12461 SW 130 STREET | | | | | | |
| UNIT B11 | | UNIT B11 | | | | | | |
| MIAMI, FL 33186 | | MIAMI, FL 33186 | | , | F 18 8 21 111 | Maire 1836 Bold Som St. | II BBIN IBBN 18716 BNN 1978 II | 11886 II 18 8 1 |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 04192008 | Chg-P | CR2E034 (12/06) | |
| City & State | | City & State | | 4. FEL Nymbe | 052773 | 33 | plied For t Applicable | |
| Zip | Country | Zíp · | Count | try | 5. Certificate | of Status Desired | See Required | |
| | 6. Name and Address of Current | Registered Agent | | | 7. Name and | Address of New R | egistered Agent | |
| PODDIOUEZ MARIÃNO | | | | Name | | | | |
| RODRIGUEZ, MARIÂÑO | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| MIAMI, FL | | | | | | | | |
| Stew Control | | | | | | | | |
| 79, | | | | City | • | - | FL Zip Code | e |
| 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 | | | | | | | | and accept |
| the obligations of registered agent. | | | | | | | | |
| SIGNATURE | | | | | | | | |
| Skinature, typed a printed name of registered apent and title if applicable. (NOTE, Registered Apent signature required when reinstating) DATE | | | | | | | | |
| FILE NOWILI FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. | | | | | \$5.00 May Be Added to Fees | | | |
| 10. | | | 11. | | ADDITIONS/ | CHANGES TO OFF | ICERS AND DIRECTOR | S IN 11 |
| TITLE | PVS | Delete TITL | | 1 | | | ☐ Change | Addition |
| NAME Street address | | | NAME | ET ADDRESS | | | | |
| CITY - ST-ZIP | | | | ST-ZIP | | | | |
| TITLE | | | TITLE | | | | ☐ Change | ☐ Addition |
| NAME | | | NAME | 1 | | | C) change | |
| STREET ADDRESS | STR | | STREE | ET ADDRESS | | | | |
| CITY-ST-ZIP | CIT | | CITY- | ST-ZIP | | | | |
| ITLE | | | TITLE | | | | ☐ Change | Addition |
| NAME SYDEET ASSOCIATION | | | NAME | | | | | |
| CITY-ST-ZIP | | | | ET ADDRESS -ST-ZIP | | | | |
| lille | | | IUTE | | | | Change | Addition |
| NAME | | | NAME | ŧ | | | Change | Addition |
| STREET ADDRESS | | | | ET ADDRESS | | | | |
| CITY-ST-ZIP | CITY | | CITY | -ST-ZIP | | | | |
| TITLE | ☐ Delate TITL | | TITLE | | | | ☐ Change | Addition |
| NAME | , | | NAM | i | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | ET ADDRESS -ST-ZIP | | | | | |
| | | | | | | | | |
| TITLE NAME | | ☐ Delete | NAME | | | | ☐ Change | ☐ Addition |
| STREET ADDRESS | | | | ET ADDRESS | | | | |
| CITY-ST-ZIP CIT | | CITY- | -ST-ZIP | | | | | |
| 12 I hereby o | entify that the information supplied with | this filing does not qualify for | or the eve | anoliana anata | ningd in Chapter 146 | Florido Ctalutos I | Ludhar actifu that the in | oformation |

i.e. in prepty certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental leport 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 truther empowered to execute this 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 empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

108 (786) 912-1245