

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P94000045741

1. Entity Name
EPIXTAR CORP.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 DEC 10 AM 8:00

Principal Place of Business
11900 BISCAYNE BLVD., STE 700
MIAMI, FL 33181

Mailing Address
11900 BISCAYNE BLVD., STE 700
MIAMI, FL 33181

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

12072004 Chg-P CR2E034 (10/03)

4. FEI Number
65-0722193

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GAMBONE, DEBORAH
11900 BISCAYNE BLVD., STE 700
MIAMI, FL 33181

7. Name and Address of New Registered Agent

Name

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

City FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating)

DATE _____

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPDC SROUR, DAVID 11900 BISCAYNE BLVD., STE 262 MIAMI, FL 33181	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SUAREZ, GEORGE 11900 BISCAYNE BLVD., STE 262 MIAMI, FL 33181	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS GAMBONE, DEBORAH 11900 BISCAYNE BLVD., STE 262 MIAMI, FL 33181	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPCM FOZZARD, HARRY 11900 BISCAYNE BLVD., STE 262 MIAMI, FL 33181	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO DEPALANTINO, NORMAN 11900 BISCAYNE BLVD., STE 262 MIAMI, FL 33181	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CTO SABLON, RICHARD 11900 BISCAYNE BLVD., STE 262 MIAMI, FL 33181	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P,D,COO Srou, David 11900 Biscayne Blvd. Ste.700 Miami, FL 33181	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO Kaminsky, Ilene 11900 Biscayne Blvd., Ste. 700 Miami, FL 33181	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO Greenman, Irving 11900 Biscayne Blvd., Ste. 700 Miami, FL 33181	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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12/10/04--01066--007 **70.00

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Deborah Gambone Deborah Gambone, Secretary 12/8/04 305-503-8600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #