

2004 FOR PROFIT CORPORATION ANNUAL REPORT

5/3/2004-

FILED
Jun 07, 2004 8:00 am
Secretary of State

05-03-2004 91053 011 ***150.00

DOCUMENT # P01000071035

1. Entity Name
WIRELESS INFO-TECH, INC.Principal Place of Business
8200 W 33 AVENUE
BAY 5
HIALEAH, FL 33016Mailing Address
8200 W 33 AVENUE
BAY 5
HIALEAH, FL 33016

DO NOT WRITE IN THIS SPACE

01262004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-1121772Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ENRIQUEZ, STEPHEN C
TURNER & ASSOCIATES CPAS
19 WEST FLAGLER STREET SUITE 600
MIAMI, FL 33130DO NOT WRITE
IN THIS SPACE

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

Signature, name or printing name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

04-10-2004
DATEFILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.009. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD CIMADEVILLA, ANTONIO 8200 W 33 AVENUE HIALEAH, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DEDIEGO, JONHECTOR 8200 W 33 AVENUE HIALEAH, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(D), 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 filers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-10-2004

305-361-5772