## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000001007

City-St-Zip:

NEW YORK, NY 10103

FILED Apr 30, 2004 Secretary of State

Entity Name: AERWAV INTEGRATION GROUP, INC. **Current Principal Place of Business: New Principal Place of Business:** 6089 JOHNS ROAD STE 1 TAMPA, FL 33634 **Current Mailing Address: New Mailing Address:** 6089 JOHNS ROAD STE 1 TAMPA, FL 33634 FEI Number: 59-3631087 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition SHIVER, ROBERT J Name: Name: SHIVER, ROBERT J 666 FIFTH AVENUE, 14TH FLOOR (C/O AERWAV) 915 BROADWAY 18TH FLOOR(C/O AERWAV) Address: Address: City-St-Zip: NEW YORK, NY 10103 City-St-Zip: NEW YORK, NY 10010 Title: Title: () Delete (X) Change ( ) Addition Name: NASPO, GEORGE F Name: NASPO, GEORGE F 666 FIFTH AVENUE, 14TH FLOOR (C/O AERWAV) 915 BROADWAY 18TH FLOOR (C/O AERWAV) Address: Address: NEW YORK, NY 10010 NEW YORK, NY 10103 City-St-Zip: City-St-Zip: (X) Delete Title: Title: () Change () Addition ALFANDARY, JACK G Name: Name: 666 FIFTH AVENUE, 14TH FLOOR (C/O AERWAV) Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: GEORGE NASPO V 04/30/2004