

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002826

Entity Name: AIRIMBA WIRELESS, INC.

FILED
Mar 29, 2010
Secretary of State

Current Principal Place of Business:

C/O CSC
2711 CENTERVILLE ROAD, SUITE 400
WILMINGTON, DE 19808

New Principal Place of Business:

Current Mailing Address:

C/O CSC
2711 CENTERVILLE ROAD, SUITE 400
WILMINGTON, DE 19808

New Mailing Address:

FEI Number: 90-0113529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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:

Title: DIR.
Name: ROBERTS, THOMAS
Address: 1210 EAST CARY STREET, SUITE 400
City-St-Zip: RICHMOND, VA 23219

Title: DIR.
Name: ROPER, G. KINSEY
Address: 3701 LASSITER MILL RD.
City-St-Zip: RALEIGH, NC 27609

Title: DIR.
Name: SZYPERSKI, JAMES
Address: 75 FIFTH STREET NW, SUITE 319
City-St-Zip: ATLANTA, GA 30308

Title: DIR.
Name: MAZZARINO, JOHN
Address: 111 EAST HARGETT ST., SUITE 300
City-St-Zip: RALEIGH, NC 27601

Title: DIR.
Name: CARNEY, BRIAN
Address: 1210 EAST CARY STREET, SUITE 400
City-St-Zip: RICHMOND, VA 23219

I hereby 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 all other like empowered.

SIGNATURE: JAMES K. SZYPERSKI

CEO

03/29/2010

Electronic Signature of Signing Officer or Director

Date