

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004533

Entity Name: LUXON WIRELESS INC.

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

856 SCALLOP CT. #206  
FORT WALTON BEACH, FL 32548

## New Principal Place of Business:

234 PELICAN PLACE  
#6  
DESTIN, FL 32541

## Current Mailing Address:

P.O. BOX 1465  
FORT WALTON BEACH, FL 32549

## New Mailing Address:

FEI Number: 20-0201864      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GORTNEY, BRIAN W II  
856 SCALLOP CT. #206  
FORT WALTON BEACH, FL 32548      US

## Name and Address of New Registered Agent:

GORTNEY, BRIAN W II  
P.O. BOX 1465  
FORT WALTON BEACH, FL 32549      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: BRIAN W. GORTNEY, II

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP ( ) Delete  
Name: GORTNEY, BRIAN W II  
Address: 856 SCALLOP CT. #206  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: DST ( ) Delete  
Name: CARUSO, KAREN M  
Address: 8102 WADEBRIDGE CIRCLE  
City-St-Zip: HUNTINGTON BEACH, CA 92646

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change ( ) Addition  
Name: GORTNEY, BRIAN W II  
Address: PO BOX 1465  
City-St-Zip: FORT WALTON BEACH, FL 32549

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: BRIAN W. GORTNEY, II

CPD

04/29/2005

Electronic Signature of Signing Officer or Director

Date