
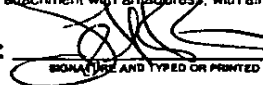


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 13, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90380 039 \*\*\*150.00

<b>DOCUMENT # F05000002602</b>					
1. Entity Name <b>VELOCITA WIRELESS HOLDING CORP.</b>					
Principal Place of Business <b>10 WOODBRIDGE CENTER DRIVE WOODBIDGE, NJ 07095</b>			Mailing Address <b>10 WOODBRIDGE CENTER DRIVE WOODBIDGE, NJ 07095</b>		
2. Principal Place of Business  Suite, Apt. #, etc.			3. Mailing Address  Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>80-0119422</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>NATIONAL CORPORATE RESEARCH, LTD., INC. 515 E. PARK AVE. TALLAHASSEE, FL 32301</b>			7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MAYER, STEVE 11812 SAN VICENTE BLVD., SUITE 300 LOS ANGELES, CA 90049 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	General Manager Mark Huff 10 Woodbridge Center Drive Woodbridge, NJ 07095 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KOLLITIEDES, GOERGE 299 PARK AVENUE, 22ND FLOOR NEW YORK, NY 10171 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Sam Reimer 10 Woodbridge Center Drive Woodbridge, NJ 07095 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD NICHOLS, BART 136 HEBER AVE., SUITE 206 PARK CITY, UT 84060 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Richard Ponnally 10 Woodbridge Center Drive Woodbridge, NJ 07095 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PARISE, GEORGE 10 WOODBRIDGE CENTER DRIVE WOODBIDGE, NJ 07095 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director of Human Resources Terry Reilly 10 Woodbridge Center Drive Woodbridge, NJ 07095 <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS MILLER, PAUL 10 WOODBRIDGE CENTER DRIVE WOODBIDGE, NJ 07095 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NELSON, CHARLES 10 WOODBRIDGE CENTER DRIVE WOODBIDGE, NJ 07095 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 		4/26/06		(732) 602-5500	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>SAM REIMER</b> Vice President of Finance					