

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000007018

**FILED**  
**May 02, 2012**  
**Secretary of State**

**Entity Name:** MULTIBAND SUBSCRIBER SERVICES, INC.

**Current Principal Place of Business:**

9449 SCIENCE CENTER DRIVE  
NEW HOPE, MN 55428

**New Principal Place of Business:**

**Current Mailing Address:**

9449 SCIENCE CENTER DRIVE  
NEW HOPE, MN 55428

**New Mailing Address:**

**FEI Number:** 41-1958119

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MILLER, DONALD  
1924 COCOPLUM WAY  
NAPLES, FL 34105 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

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: MANDEL, JIM  
Address: 9449 SCIENCE CENTER DR  
City-St-Zip: NEW HOPE, MN 55428

Title: CFO  
Name: BELL, STEVEN  
Address: 9449 SCIENCE CENTR DRIVE  
City-St-Zip: NEW HOPE, MN 55428

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: MICHAEL J. MAILLIARD

TAX

05/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date