2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F97000000426

1. Entity Name METROPCS, INC.



Principal Place of Business

8144 WALNUT HILL LANE, #68Q

800

DALLAS, TX 75231

Mailing Address

8144 WALNUT HILL LANE, #890

800

DO NOT WRITE IN THIS SPACE

DALLAS, TX 75231

FILED May 10, 2007 8:00 am Secretary of State

05-10-2007 90025 046 ***150.00

40110---



02192007

No Chg-P

CR2E034 (11/05)

4. FEI Number

75-2550006 20-5449198

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS ST. TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

. 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

Signature, typed or printed name of registered agent and title if applicab

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Arter may 1, 2007 Fee will be \$550.00			
10.	OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDC LINDQUIST, ROGER B LINQUI 8144 WALNUT HILL LANE, STE 800 DALLAS, TX 75231	ST, ROGER O	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS STACHIW, MARK 8144 WALNUT HILL LANE SUITE 800 DALLAS, TX 75231)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARTER, J. BRAXTON 8144 WALNUT HILL LANE, STE 800 DALLAS, TX 75231		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KORNEGAY, CHRISTINE B 8144 WALNUT HILL LAN, STE 800 DALLAS, TX 75231		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 a 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:

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRECTO

4/24/07

(214) 265-2550

Daytime Pho