2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005
Secretary of State

DOCUMENT# F97000004309

Entity Name: CES WIRELESS TECHNOLOGIES CORP.

Current Principal Place of Business:

925-122 SOUTH SEMORAN BLVD
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

925-122 SOUTH SEMORAN BLVD
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 59-3187828 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOHAN, PATRICK
925-122 SOUTH SEMORAN BLVD
WINTER PARK, FL 32792 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:	PD	( ) Delete
Name:	LOHAN, PATRICK	
Address:	925-122 SOUTH SEMORAN BLVD	
City-St-Zip:	WINTER PARK, FL	
Title:	CSD	( ) Delete
Name:	MERCURIO, WILLIAM	
Address:	925-122 SOUTH SEMORAN BLVD	
City-St-Zip:	WINTER PARK, FL	
Title:	S	( ) Delete
Name:	GASTON, ADA	
Address:	925-122 SOUTH SEMORAN BLVD	
City-St-Zip:	WINTER PARK, FL	
Title:	D	( ) Delete
Name:	LEFKOWITZ, IVAN	
Address:	430 NORTH MILLS AVENUE	
City-St-Zip:	ORLANDO, FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: ADA GASTON S 04/20/2005

Electronic Signature of Signing Officer or Director — Date