2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 22, 2005
Secretary of State

DOCUMENT# L02000019961

Entity Name: CELL SERVICE L.L.C.

Current Principal Place of Business:

8145 HARDING AVE., SUITE A
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

8145 HARDING AVE., SUITE A
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 55-0789924 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PRATS, GABRIEL
2121 PONCE DE LEON BLVD., SUITE 240
CORAL GABLES, FL 33134 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

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	MUTIS, CLARITA	
Address:	8145 HARDING AVE., SUITE A	
City-St-Zip:	MIAMI BEACH, FL 33141	
Title:	MGR	( ) Delete
Name:	OROZCO, LUIS CARLOS	
Address:	2121 PONCE DE LEON BLVD., SUITE 240	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	MGR	(X) Delete
Name:	FLORENTINO, GARCIA	
Address:	8145 HARDING AVENUE, SUITE A	
City-St-Zip:	MIAMI BEACH, FL 33141	
Title:	MGR	( ) Delete
Name:	GARCIA, FLORENTINO	
Address:	2121 PONCE DE LEON BLVD., SUITE 240	
City-St-Zip:	CORAL GABLES, FL 33134	

ADDITIONS/CHANGES:

Title:	MGR	(X) Change ( ) Addition
Name:	MUTIS, CLARITA	
Address:	2121 PONCE DE LEON BLVD., SUITE 240	
City-St-Zip:	CORAL GABLES, FL 33134	
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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FLORENTINO GARCIA MGR 02/22/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date