2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102570

Entity Name: BLUE WIRELESS LLC

FILED Mar 31, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1104 CYPRESS GARDENS BLVD 1410 EAST MAIN STREET SUITE-C BARTOW, FL 33830

WINTER HAVEN, FL 33884

New Mailing Address: Current Mailing Address:

P.O. BOX 22334

LAKE BUENA VISTA, FL 32830

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

BATRA, HARISH K BATRA, HARISH K 1410 EÁST MAIN STREET 8180 BOAT HOOK LOOP **UNIT #329** BARTOW, FL 33830

WINDERMERE, FL 34786 US

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: HARISH BATRA 03/31/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Change () Addition () Delete

BATRA, HARISH K Name: Name: Address: P.O. BOX 22334 Address: City-St-Zip: LAKE BUENA VISTA, FL 32830 City-St-Zip:

Title: V.P () Delete Title: () Change () Addition

Name: BATRA, SAMEER Name: Address: P.O. BOX 22334 Address: City-St-Zip: LAKE BUENA VISTA, FL 32830 City-St-Zip:

V.PTitle: () Change () Addition

Title: () Delete MAINI, SABINA Name: Name:

P.O. BOX 22334 Address: Address: City-St-Zip: LAKE BUENA VISTA, FL 32830 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SAMEER BATRA 03/31/2007