

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000038061

FILED  
Apr 30, 2011  
Secretary of State

Entity Name: WIMAX DATA NETWORK, LLC

**Current Principal Place of Business:**

C/O FINKELTSTEIN  
276 FIFTH AVENUE, STE. 604  
NEW YORK, NY 10001

**New Principal Place of Business:**

**Current Mailing Address:**

C/O FINKELTSTEIN  
276 FIFTH AVENUE, STE. 604  
NEW YORK, NY 10001

**New Mailing Address:**

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

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

STEINBERG, PAUL B ESQ.  
767 ARTHUR GODFREY ROAD  
MIAMI BEACH, FL 33140 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/MANAGERS:**

Title: MGRM  
Name: SQUIRES, GILBERT K ESQ.  
Address: 767 ARTHUR GODFREY ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: SEC  
Name: SQUIRES, GILBERT K ESQ.  
Address: 767 ARTHUR GODFREY ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: DIR  
Name: SQUIRES, GILBERT K ESQ.  
Address: 767 ARTHUR GODFREY ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM  
Name: HUBLITZ, MAURIZO  
Address: 276 S. BENSON AVENUE  
City-St-Zip: UPLAND, CA 91786

Title: DIR  
Name: HUBLITZ, MAURIZO  
Address: 276 S. BENSON AVENUE  
City-St-Zip: UPLAND, CA 91786

I hereby 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: GILBERT K. SQUIRES, ESQ.

MGRM

04/30/2011

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