2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # M00000001910

1. Entity Name
NII COMMUNICATIONS GP, LLC

Principal Place of Business	Mailing Address
1717 N. LOOP 1604 EAST, STE 250	1717 N. LOOP 1604 EAST, STE 250
SAN ANTONIO, TX 78232	SAN ANTONIO, TX 78232

DO NOT WRITE IN THIS SPACE

01192004 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
74-2998379	Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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_____ DATE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2004

U00000042413
02/10/04-80023-008 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	NII COMMUNICATIONS, INC.
STREET ADDRESS	1717 N. LOOP 1604 EAST, STE 250
CITY-ST-ZIP	SAN ANTONIO, TX 78232
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify 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 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: _____   MARK J. SITTER   (210) 403-9100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #