2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED May 17, 2004 8:00 am Secretary of State 05-17-2004 90567 003 ****50.00

1. Entity Name SAMSUNG TELECOMMUNICATI		CE,	03-17-2004 9	
Principal Place of Business 1130 E. ARAPAHO ROAD RICHARDSON, TX 75081	Mailing Address 1130 E. ARAPAHO ROA RICHARDSON, TX 7508			
2. Principal Place of Business 3018 Lackart Dr. Suite, Apt. #, etc.	3. Mailing Address 30 2. \ Dr. Suite, Apt. #, etc.	kast Dr	04282004 Chg-LLC	CR2E083 (10/03)
City & Starp Kichard SXX Tx	Richardson		4. FEI Number 75-2910862	Applied For Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desired	
6. Name and Address of Curr	rent Registered Agent	Name	7. Name and Address of New R	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			Street Address (P.O. Box Number is Not Acceptable)	
€ <u>3</u>		City		FL Zip Code
The above named entity submits this stateme the obligations of registered agent.	nt for the purpose of changing its r	egistered office or registr	ered agent, or both, in the State of Flor	rida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered a	agent and title if applicable. (NOTE:	: Registered Agent signature require	red when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2004			Make	e check payable to Department of State
	MBERS/MANAGERS	10.	ADDITIONS/	
TITLE MGR BRUCE, GAVIN STREET ADDRESS 869 N.W. 97TH AVENUE CITY-ST-ZIP PLANTATION, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE MGR NAME KIM, JEONG H STREET ADDRESS CITY-ST-ZIP RICHARDSON, TX	☐ Delete	STREET ADDRESS 30	P 1 Jeona H 1 & Lookart D haidson, Tx 1508	□ Change □ Addition
TITLE MGR NAME AN, MYUNG U STREET ADDRESS 1130 E. ARAPAHO ROAD CITY-ST-ZIP RICHARDSON, TX	☐ Delete	TITLE MENT AND STREET ADDRESS 1301	musico 1	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	☐ Delete	TITLE NAME		☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP		

limited liability company or the receiver or trustee emportance to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #