



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 17, 2007 8:00 am**  
**Secretary of State**

04-12-2007 90048 021 \*\*\*150.00

|  |   |   |
|--|---|---|
| <b>DOCUMENT # M80392</b>   |   |    |
| 1. Entity Name<br><b>TELECOM BUILDING CORPORATION</b>  |   |   |
| Principal Place of Business<br><b>2633 SPANISH RIVER RD<br/>1171 BRICKELL AVENUE BOCA RATON, FL 33432<br/>STE 2050<br/>MIAMI, FL 33131 US</b>  |   | Mailing Address<br><b>2633 SPANISH RIVER RD<br/>1171 BRICKELL AVENUE BOCA RATON, FL 33432<br/>STE 2050<br/>MIAMI, FL 33131 US</b> |
| <b>DO NOT WRITE IN THIS SPACE</b>  |   |   |
|  |   | <br>03172007 No Chg-P CR2E034 (11/05)           |
|  |   | 4. FEI Number<br><b>65-0051458</b>  |
|  |   | Applied For<br><input type="checkbox"/> Not Applicable  |
|  |   | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                   |
| 6. Name and Address of Current Registered Agent<br><b>FROST, IRWIN M.<br/>1171 BRICKELL AVENUE<br/>STE 2050<br/>MIAMI, FL 33131</b>  |   | <b>BURRELL M. WIGGINS<br/>2633 SPANISH RIVER RD<br/>BOCA RATON, FL 33432</b>  |
|  |   | <b>DO NOT WRITE IN THIS SPACE</b>   |
| 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.<br>SIGNATURE <u>Burrell M. Wiggins</u> <b>BURRELL M. WIGGINS</b> <u>4-2-07</u><br><small>Signatures, typed or printed name of registered agent and fee (if applicable). (NOTE: Registered Agent signature required when registering.)</small> DATE   |   |   |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2007 Fee will be \$350.00</b>  |   | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>            |
| 10. OFFICERS AND DIRECTORS   |   |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP  | D<br>WIGGINS, BURRELL M.<br>2633 SPANISH RIVER RD<br>BOCA RATON, FL |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP  | D<br>WIGGINS, B. MICHAEL<br>5190 LEITNER DR E<br>CORAL SPRINGS, FL  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP  |   |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP  |   |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP  |   |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP  |   |   |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |   |   |
| SIGNATURE <u>Burrell M. Wiggins</u> <b>BURRELL M. WIGGINS</b> <u>4-2-07</u> <u>561-2123656</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR Date Daytime Phone #</small>   |   |   |