

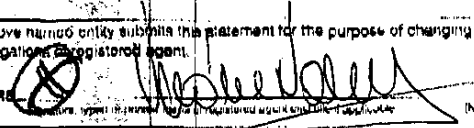
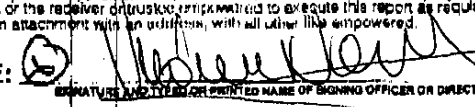
From:

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FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90249 050 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000014412																																																																																																																											
1. Entity Name GIGATEL COMMUNICATIONS, INC.																																																																																																																											
Principal Place of Business 6175 NW 153 ST., #101 MIAMI, FL 33014		Mailing Address 6175 NW 153 ST., #101 MIAMI, FL 33014																																																																																																																									
2. Principal Place of Business Suite, Apt. # etc. City & State Zip		3. Mailing Address Suite, Apt. # etc. City & State Zip																																																																																																																									
04272004		Chg-P CR2E034 (10/03)																																																																																																																									
4. FEI Number 65-0982143		Applicant Fee Not Applicable																																																																																																																									
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																																																																																																																									
6. Name and Address of Current Registered Agent NORIEGA, ROLANDO 6666 N.W. 50TH STREET SUITE #110 MIAMI, FL 33140		7. Name and Address of New Registered Agent Name VERONICA NORIEGA Street Address (P.O. Box Number is Not Acceptable) 6175 N.W. 153rd ST 101 City Miami Lakes FL 33014																																																																																																																									
8. The above named entity submits the 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  (NOTE: Registered Agent signature required when re-registering) DATE 4/27/04																																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																																									
10. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>NORIEGA, ROLANDO</td> <td>☒ Delete</td> </tr> <tr> <td>NAME</td> <td>6666 N.W. 50TH STREET</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>MIAMI, FL 33140</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>VPTD</td> <td>☐ Delete</td> </tr> <tr> <td>NAME</td> <td>NORIEGA, VERONICA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>6666 N.W. 50TH STREET</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>MIAMI, FL 33140</td> <td></td> </tr> <tr> <td>TITLE</td> <td>BO</td> <td>☒ Delete</td> </tr> <tr> <td>NAME</td> <td>BISH, ALEX</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>6666 N.W. 50TH STREET</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>MIAMI, FL 33140</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	NORIEGA, ROLANDO	☒ Delete	NAME	6666 N.W. 50TH STREET		STREET ADDRESS	MIAMI, FL 33140		CITY-STATE-ZIP			TITLE	VPTD	☐ Delete	NAME	NORIEGA, VERONICA		STREET ADDRESS	6666 N.W. 50TH STREET		CITY-STATE-ZIP	MIAMI, FL 33140		TITLE	BO	☒ Delete	NAME	BISH, ALEX		STREET ADDRESS	6666 N.W. 50TH STREET		CITY-STATE-ZIP	MIAMI, FL 33140		TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-STATE-ZIP			TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-STATE-ZIP			TITLE		☐ Delete	NAME			STREET ADDRESS			CITY-STATE-ZIP			11. ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1"> <tr> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>P</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>6175 N.W. 153rd ST 101</td> <td>☒ Change ☒ Addition</td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>MIAMI LAKES, FL 33014</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE		☐ Change ☐ Addition	NAME	P		STREET ADDRESS	6175 N.W. 153rd ST 101	☒ Change ☒ Addition	CITY-STATE-ZIP	MIAMI LAKES, FL 33014		TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS		☐ Change ☐ Addition	CITY-STATE-ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS		☐ Change ☐ Addition	CITY-STATE-ZIP			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS		☐ Change ☐ Addition	CITY-STATE-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 607, 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: 		DATE 4/27/04 705-231-6993																																																																																																																									
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