2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000027953

Entity Name: CELLULAR MASTERS, INC.

1888 NW 75TH WAY

HOLLYWOOD, FL 33024

Address: City-St-Zip: FILED May 16, 2007 Secretary of State

Littly Na	ille. CELLUL	AR WASTERS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
8338 NW 68 STREET MIAMI, FL 33166			10900 NW 21ST STRI MIAMI, FL 33172	10900 NW 21ST STREET SUITE 210 MIAMI, FL 33172	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
8338 NW 68 STREET MIAMI, FL 33166			10900 NW 21ST STREET SUITE 210 MIAMI, FL 33172		
FEI Number	: 65-1042641	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
The above	7 29 CT 1, FL 33027	US submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no ng Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (MCHATET, RA 1888 NW 75TI HOLLYWOOD	H WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (MCHATET, HA 12958 SW 29 MIRAMAR, FL	СТ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TD (MCHAATETE,) Delete RACHIDA	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: HAMID MCHATET VP 05/16/2007