

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000073129

Entity Name: I WIRELESS, INC.

FILED
Apr 08, 2009
Secretary of State**Current Principal Place of Business:**2050 N ANDREWS AVE EXT.
SUITE #109
POMPANO BEACH, FL 33069**New Principal Place of Business:****Current Mailing Address:**2050 N ANDREWS AVE EXT
SUITE #109
POMPANO BEACH, FL 33069**New Mailing Address:**

FEI Number: 65-1029411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:HOROWIZ, IRA
2600 NE 48TH ST
LIGHTHOUSE POINT, FL 33069 US**Name and Address of New Registered Agent:**HOROWIZ, IRA
2600 NE 48TH ST
LIGHTHOUSE POINT, FL 33064 US

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.

SIGNATURE: IRA HORWITZ

04/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: HOROWITZ, IRA
Address: 2600 NE 48TH STREET
City-St-Zip: POMPAN BEACH, FL 33064**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: IRA HOROWITZ

PRES

04/08/2009

Electronic Signature of Signing Officer or Director

Date