2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2004
Secretary of State

DOCUMENT# P01000029736

Entity Name: MOBILEXONE.COM, CORP.

Current Principal Place of Business:

542 WASHINGTON AVE
MIAMI, FL 33139

New Principal Place of Business:

16300 NE 19TH AVENUE
SUITE A
MIAMI, FL 33162

Current Mailing Address:

16300 NE 19 AVE STE 235
MIAMI, FL 33162

New Mailing Address:

FEI Number: 65-1088867 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARBER, MIGUEL
16300 NE 19 AVE STE 235
MIAMI, FL 33162 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PDT ( ) Delete
Name: GARBER, MIGUEL G
Address: 16300 NE 19 AVE STE 235
City-St-Zip: MIAMI, FL 33162

Title: VSD ( ) Delete
Name: CLAUDIA-LUMER, JUDITH
Address: 16300 NE 19TH AVE 235
City-St-Zip: MIAMI, FL 33162

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD (X) Change ( ) Addition
Name: GARBER, MIGUEL G
Address: 16300 NE 19 AVE STE 235
City-St-Zip: MIAMI, FL 33162

Title: PTD (X) Change ( ) Addition
Name: CLAUDIA-LUMER, JUDITH
Address: 16300 NE 19TH AVE 235
City-St-Zip: MIAMI, FL 33162

Title: D ( ) Change (X) Addition
Name: LUMER, GUSTAVO
Address: 16300 NE 19 AVENUE # A
City-St-Zip: MIAMI, FL 33162

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MIGUEL GARBER VSD 05/27/2004

Electronic Signature of Signing Officer or Director — Date