

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000044680

FILED
Jan 21, 2004
Secretary of State

Entity Name: WIRELESS ACCESSORIES XPRESS, INC.

Current Principal Place of Business:

1510 NAPANEE ST. N.W.
PALM BAY, FL 32907

New Principal Place of Business:

100 RIALTO PLACE
SUITE 875
MELBOURNE, FL 32901

Current Mailing Address:

1510 NAPANEE ST. N.W.
PALM BAY, FL 32907

New Mailing Address:

100 RIALTO PLACE
SUITE 875
MELBOURNE, FL 32901

FEI Number: 59-3715632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACKFORD, ROBERT N
1510 NAPANEE ST. N.W.
PALM BAY, FL 32907

Name and Address of New Registered Agent:

BLACKFORD, ROBERT N
100 RIALTO PLACE
SUITE 875
MELBOURNE, FL 32901

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:

01/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BLACKFORD, ROBERT
Address: 1510 NAPANEE ST. N.W.
City-St-Zip: PALM BAY, FL 32907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BLACKFORD, ROBERT
Address: 100 RIALTO PLACE, SUITE 875
City-St-Zip: MELBOURNE, FL 32901

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: ROBERT N. BLACKFORD

PRES

01/21/2004

Electronic Signature of Signing Officer or Director

Date