## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000061106

834 NW 132ND AVE

SUNRISE, FL 33325

Address: City-St-Zip:

Entity Name: CYBERNATION WIRELESS CORPORATION.

FILED Apr 25, 2006 Secretary of State

Entity Name: Cybernation Wireless Corporation.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P.O.BOX 11279 FT LAUDERDALE, FL 333391279				12489 NW 44TH STREET CORAL SPRINGS, FL 33065	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O.BOX 11279 FT LAUDERDALE, FL 333391279				12489 NW 44TH STREET CORAL SPRINGS, FL 33065	
FEI Number:	: 65-1115206	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
WARRICK, WOODWARD C INTERNATIONAL BLB 2455 E SUNRISE BLVD PENTHOUSE W FT LAUDERDALE, FL 33304 US			2881 EAST OAKLAND SUITE 208	WARRICK, WOODWARD C 2881 EAST OAKLAND PARK BLVD. SUITE 208 FT LAUDERDALE, FL 33306 US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				04/25/2006	
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financi	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( LEE, HEADLE 3835 SW 167 MIRMAR, FL	AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BOCCHINO, È 6300 DORSA		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	STD ( BISPOTT, CLI	) Delete EVE	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: ERNEST G. BOCCHINO PRE 04/25/2006