## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P02000026376 1. Entity Name DORAL KING WIRELESS, INC.



FILED Feb 10, 2006 08:00 AN Secretary of State

Principal Place of Business

9761 NW 57TH TERRACE

MIAMI, FL 33178

Mailing Address

9761 NW 57TH TERRACE MIAMI, FL 33178



## DO NOT WRITE IN THIS SPACE

01262006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For Not Applicable

5. Certificate of Status Desired Sa.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIGNATURE AND TYPE

DEL PILAR PEREYRA, MARIA 9761 NW 57TH TERRACE MIAMI, FL 33178

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000428350 02/21/06-80044-015 150.00
10.	OFFICERS AND DIREC	TORS	1		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD DEL PILAR PEREYRA, MARIA 6898 WEST 30TH LANE HIALEAH, FL 33018				
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:	DO	NOT WRITE
TITLE NAME STREET ADDRESS CHY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY- ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certily that the information supplied with this thing does not qualify for the exemptions contained in Chapter 1.19, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 trusted employed at the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					

NAME OF SIGNING OFFICER OR DIRECTOR