# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 05, 2005**
**Secretary of State**

DOCUMENT# P02000038819

**Entity Name:** SOLUTIONS WIRELESS NETWORKS, INC.

**Current Principal Place of Business:**

140 ALEXANDRIA BLVD., STE E
OVIEDO, FL 32765

**New Principal Place of Business:**

5930 RED BUG LAKE RD.
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

140 ALEXANDRIA BLVD., STE E
OVIEDO, FL 32765

**New Mailing Address:**

5930 RED BUG LAKE RD.
WINTER SPRINGS, FL 32708

**FEI Number: 01-0669344** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BIRKETT, JASON
140 ALEXANDRIA BLVD., STE E
OVIEDO, FL 32765 US

**Name and Address of New Registered Agent:**

BIRKETT, JASON
5930 RED BUG LAKE RD.
WINTER SPRINGS, FL 32708 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: JASON BIRKETT 01/05/2005
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: BROOMFILED, SCOTT
Address: 140 ALEXANDRIA BLVD., STE E
City-St-Zip: OVIEDO, FL 32765

Title: D ( ) Delete
Name: BIRKETT, JASON
Address: 140 ALEXANDRIA BLVD., STE E
City-St-Zip: OVIEDO, FL 32765

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition
Name: BROOMFILED, SCOTT
Address: 5930 RED BUG LAKE RD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D (X) Change ( ) Addition
Name: BIRKETT, JASON
Address: 5930 RED BUG LAKE RD.
City-St-Zip: WINTER SPRINGS, FL 32708

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: JASON BIRKETT PRES 01/05/2005
Electronic Signature of Signing Officer or Director Date