2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000066568

Entity Name: INSWITCH SOLUTIONS, INC.

FILED Apr 29, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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7247 NW 54 STREET 248 MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

7247 NW 54 STREET 16300 NE 19 AVE 248 STE C

MIAMI, FL 33166 NORTH MIAMI BEACH, FL 33162

FEI Number: 02-0620028 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FERNANDEZ, DANIEL G SILVA'S ENTERPRISE, INC. 7247 NW 54 STREET #248 16300 NE 19 AVE

MIAMI, FL 33166 US STE C
NORTH MIAMI BEACH, FL 33162 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: FERNANDO SILVA 04/29/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: PD () Delete Title: () Change () Addition

Name: FERNANDEZ, DANIEL G Name:
Address: 7247 NW 54 STREET #248 Address:

 Address:
 7247 NW 54 STREET #248
 Address:

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 SULIMOVICH, MAURICIO M
 Name:

 Address:
 7247 NW 54 STREET #248
 Address:

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 MOREIRA, DARIO A
 Name:

 Address:
 7247 NW 54 STREET #248
 Address:

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:

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: DANIEL FERNANDEZ PD 04/29/2004