## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000084046

2394 APACHE DR

MELBOURNE, FL 32935

Address: City-St-Zip:

FILED Jun 07, 2005 Secretary of State

Entity Name: TELCO 214 EQUIPMENT WHOLESALE, INC.					
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
SUITE 808	1901 SOUTH HARBOR CITY BLVD SUITE 808 MELBOURNE, FL 32901 US		2571 NE KIRBY CIRCLE PALM BAY, FL 32905	US	
Current Ma	ailing Address	:	New Mailing Address:	New Mailing Address:	
SUITE 808	I SOUTH HARBOR CITY BLVD IE 808 BOURNE, FL 32901 US		2571 NE KIRBY CIRCLE PALM BAY, FL 32905	US	
FEI Number:	32-0025318	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Cu	rrent Registered Agent:	Name and Address of N	Name and Address of New Registered Agent:	
IBSA US, INC. 1901 SOUTH HARBOR CITY BLVD SUITE 808 MELBOURNE, FL 32901 US			IBSA, US INC 2571 NE KIRBY CIRCLE PALM BAY, FL 32905	2571 NE KIRBY CIRCLE	
The above in the State		bmits this statement for the pu	rpose of changing its registered o	ffice or registered agent, or both,	
SIGNATURE: S. WOOD Electronic Signature of Registered Agent				06/07/2005	
			nt	Date	
		2)(b), F.S., the corporation did not rust Fund Contribution ( ).	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () D WOOD, STEVE 325 ATLANTIC DE MELBOURNE BE		Title: ( ) Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () D RUBADO, IAN 914 KENMORE S PALM BAY, FL 3		Title: ( ) Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name:	SD () D BOKILO, ROBIN	elete	Title: ( ) Name:	Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: STEVE WOOD 06/07/2005 D