

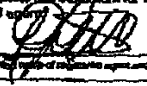
FROM :

FAX NO. :

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-02-2004 90030 048 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P03000056682			
1. Entity Name EASY WIRELESS MOBILE PHONE INC			
Principal Place of Business 269 N UNIVERSITY DRIVE SUITE A PEMBROKE PINES, FL 33024		Mailing Address 269 N UNIVERSITY DRIVE SUITE A PEMBROKE PINES, FL 33024	
2. Principal Place of Business		3. Mailing Address	
Suits, Apt. #, etc.		Suits, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 76-0733950		Applied For ☐ Not Applicable ☐	
5. Certificate of Status Desired ☐		6. Additional Fee Required ☐	
8. Name and Address of Current Registered Agent LATIN NETWORK CONSULTANTS INC 1820 N CORPORATE LAKES BLVD UNIT 104 WESTON, FL 33326		7. Name and Address of New Registered Agent LATIN NETWORK CONSULTANTS INC 2853 EXECUTIVE PARK DR. STE 201 WESTON FL 33331	
9. 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:  ISABEL RIVERO		DATE: 02/24/04	
FILE NUMBER: FILE IS \$150.00 After May 1, 2004 Fee will be \$250.00		10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRAVO, RICARDO 269 N UNIVERSITY DRIVE, SUITE A PEMBROKE PINES, FL 33024 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 trustee empowered to 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 filers empowered.			
SIGNATURE:  Ricardo Bravo		DATE: 02/24/04	

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