

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000142923

FILED
Apr 30, 2004
Secretary of State

Entity Name: NOBLE WIRELESS, INC.

Current Principal Place of Business:

7081 GRAND NATIONAL DR., STE. 103
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

7081 GRAND NATIONAL DR., STE. 103
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 20-0444931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIWANI, SULEMAN
7081 GRAND NATIONAL DR., STE. 103
ORLANDO, FL 32819

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JIWANI, SULEMAN
Address: 3337 SOHO ST. #102
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: HUSSAIN, IRFAN
Address: 20 RIVER TERR. #10G
City-St-Zip: NEW YORK, NY 10282

Title: D () Delete
Name: MITHANI, MUHAMMAD G
Address: 1022 MONICA LANE
City-St-Zip: LAWRENCEVILLE, GA 30045

Title: D () Delete
Name: HUSSAIN, RIZWAN
Address: 3344 CORONA VILLAGE WAY, #102
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: SULEMAN JIWANI

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date