2005 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 21, 2005 8:00 am Secretary of State DOCUMENT # P04000124713 03-21-2005 90086 022 ***150.00 NEXT ELECTRONICS INC. Principal Place of Business Mailing Address 16570 NW 26 AVE SUITE 5G 7200 NW 84 AVE MIAMI, FL 33166 MIAMI, FL 33160 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03142005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 20-1869942 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent _7._Name and Address of New Registered Agent = ZAJAC, ALEJANDRO Street Address (P.O. Box Number is Not Acceptable) 3750 W FLAGLER STREET MIAMI, FL 33134 City Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition ZELERTEINS, MARIANO NAME NAME STREET ADDRESS 16570 NW 26 AVE SUITE 5G STREET ADDRESS MIAMI, FL 33160 CITY-ST-ZIF CITY-ST-ZIP TITLE D Delete TITLE ☐ Change ☐ Addition ZELERTEINS, JORGE NAME NAME STREET ADDRESS 1690 WEST 38 PLACE BAY 2 STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33012 CITY-ST-ZLP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ■ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE . --Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

12. Thereby certify that the information subplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiper optiustee 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 a padress with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

NTED NAME OF SIGNING OFFICER OR DI

FILED