


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 15, 2005 8:00 am**  
**Secretary of State**

04-15-2005 90103 011 \*\*\*150.00

|  |  |  |   |   |                 |
|--|--|--|---|---|-----------------|
| <b>DOCUMENT # P04000167253</b>   |  |  |   |  |                 |
| <b>1. Entity Name</b><br>BRONCO WIRELESS, INC.   |  |  |   |   |                 |
| <b>Principal Place of Business</b><br>18901 S DIXIE HWY<br>BOOTH 130-131<br>MIAMI, FL 33157  |  |  | <b>Mailing Address</b><br>18748 SW 47TH STREET<br>MIRAMAR, FL 33029   |   |                 |
| <b>2. Principal Place of Business</b>  |  | <b>3. Mailing Address</b>  |   |   |                 |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.  |   |   |                 |
| City & State   |  | City & State   |   |   |                 |
| Zip  | Country  | Zip  | Country   | <b>4. FEI Number</b><br>20-2013364  |                 |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/>   |  |  |   | <b>\$8.75 Additional Fee Required</b>   |                 |
| <b>6. Name and Address of Current Registered Agent</b><br><br>GONZALEZ, YADIRA<br>18748 SW 47TH STREET<br>MIRAMAR, FL 33029  |  |  | <b>7. Name and Address of New Registered Agent</b><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <span style="float: right;">FL</span> Zip Code |   |                 |
| <b>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.</b>   |  |  |   |   |                 |
| <b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reinstating)  |  |  |   |   |                 |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2005 Fee will be \$550.00</b>  |  | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> |   | <b>\$5.00 May Be Added to Fees</b>  |                 |
| <b>10. OFFICERS AND DIRECTORS</b>  |  |  | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>  |   |                 |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>   | P <b>GONZALEZ, YADIRA</b> <input type="checkbox"/> Delete<br>18748 SW 47TH STREET<br>MIRAMAR, FL 33029 |  | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |                 |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>   | <input type="checkbox"/> Delete  |  | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |                 |
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| <b>12. I hereby certify that the information supplied 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 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 like empowered.</b> |  |  |   |   |                 |
| <b>SIGNATURE:</b> <u>x yadira GONZALEZ</u>   |  |  | 4-7-05  |   | 305-710-1009    |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   |  |  | Date  |   | Daytime Phone # |

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