

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000116540

Entity Name: JB WIRELESS INC.

FILED
Jan 29, 2007
Secretary of State

Current Principal Place of Business:

8150 NW 114 PLACE
DORAL, FL 33178

New Principal Place of Business:

8320 NW 68ST
MIAMI, FL 33166

Current Mailing Address:

8150 NW 114 PLACE
DORAL, FL 33178

New Mailing Address:

8320 NW 68ST.
MIAMI, FL 33166

FEI Number: 20-5553043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALEZ, NORA M
8150 NW 114 PLACE
DORAL, FL 33178 US

Name and Address of New Registered Agent:

BELINASO, JONAS A
8150 NW 114 PLACE
DORAL, FL 33178 US

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: JONAS A BELINASO

01/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GONZALEZ, NORA M
Address: 8150 NW 114 PLACE
City-St-Zip: DORAL, FL 33178

Title: VP () Delete
Name: BELINASO, JONAS A
Address: 8150 NW 114 PLACE
City-St-Zip: DORAL, FL 33178

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BELINASO, JONAS A
Address: 8320 NW 68ST.
City-St-Zip: MIAMI, FL 33166

Title: VP/S (X) Change () Addition
Name: VALENTIN, HECTOR G
Address: 8320 NW 68ST
City-St-Zip: MIAMI, FL 33166

Title: DIR. () Change (X) Addition
Name: GONZALES, NORA
Address: 8150 NW 114 PLACE
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JONAS A. BELINASO

P

01/29/2007

Electronic Signature of Signing Officer or Director

Date