

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000044422

FILED
Feb 12, 2009
Secretary of State

Entity Name: CELLULAR REALTY CORP.

Current Principal Place of Business:

135 EILEEN WAY
SYOSSET, NY 11791

New Principal Place of Business:

Current Mailing Address:

135 EILEEN WAY
SYOSSET, NY 11791

New Mailing Address:

FEI Number: 26-2685990 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAWS, NEERAJ
20363 LARINO LOOP
ESTERO, FL 339286370 US

Name and Address of New Registered Agent:

PAWA, NEERAJ
20363 LARINO LOOP
ESTERO, FL 339286370 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: NEERAJ PAWA 02/12/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VERMA, RANJAN
Address: 46 LEGENDS CIRCLE
City-St-Zip: MELVILLE, NY 11747

Title: VPD () Delete
Name: KAPOOR, ANIL
Address: 11 WINCHESTER DRIVE
City-St-Zip: MUTTONTOWN, NY 11545

Title: VPD () Delete
Name: LEVY, SCOTT
Address: 37 LEGENDS CIRCLE
City-St-Zip: MELVILLE, NY 11747

Title: VPD () Delete
Name: SADANA, TARUN
Address: 25 WILDWOOD DRIVE
City-St-Zip: LAUREL HOLLOW, NY 11791

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 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: RANJAN VERMA PRES 02/12/2009

Electronic Signature of Signing Officer or Director Date