

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050910

Entity Name: I'M WIRELESS INC.

FILED
Mar 25, 2009
Secretary of State

Current Principal Place of Business:

7495 W ATLANTIC AVE
204
DELRAY BEACH, FL, 33436

Current Mailing Address:

3860 MAX PL
3-202
BOYNTON BEACH, FL, 33436

FEI Number: 26-2657188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAHAM, SHARIEF M
3860 MAX PL
3-202
BOYNTON BEACH, FL 33436 US

New Principal Place of Business:

7495 W ATLANTIC AVE
204
DELRAY BEACH, FL 33446

New Mailing Address:

7495 W ATLANTIC AVE
204
DELRAY BEACH, FL 33446

Name and Address of New Registered Agent:

ABRAHAM, SHARIEF M
7495 W ATLANTIC AVE
204
DELRAY BEACH, FL 33446 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: SHARIEF ABRAHAM

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ABRAHAM, SHARIEF M
Address: 3860 MAX PL
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: VP () Delete
Name: ABRAHAM, HEKMAT M
Address: 3860 MAX PL
City-St-Zip: BOYNTON BEACH, FL 33436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ABRAHAM, SHARIEF M
Address: 7495 W. ATLANTIC AVE STE204
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: VP (X) Change () Addition
Name: ABRAHAM, HEKMAT M
Address: 3740 MAX PL
City-St-Zip: BOYNTON BEACH, FL 33436 US

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: SHARIEF ABRAHAM

PRES

03/25/2009

Electronic Signature of Signing Officer or Director

Date