2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000011149

City-St-Zip:

MIAMI, FL 33122

Entity Name: CELLULAR & WIRELESS WHOLESALE CORPORATION

FILED Apr 24, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Place o | New Principal Place of Business: | |
|---|--------------------------------------|--------------------------|--|---|--|
| 8240 NW 30 TER MIAMI, FL 33122 | | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| P.O. BOX 227296 MIAMI, FL 33122 | | | | | |
| FEI Number: 65-073 | 1265 FEI N | umber Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| SOSA, LUIS E 8240 NW 30 TER MIAMI, FL 33122 | – – | | | | |
| The above named in the State of Flo | | this statement for the p | urpose of changing its registered | office or registered agent, or both, | |
| SIGNATURE: | | | | | |
| Electronic Signature of Registered Agent | | | ent | Date | |
| Election Campaign I | Financing Trust F | und Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| | () Delete , LUIS E SOX 227296 | | Title: (Name: Address: |) Change ()Addition | |

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: LUIS SOSA DPS 04/24/2008