

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000101558

Entity Name: WIRELESS CENTER USA, INC.

FILED
Apr 10, 2007
Secretary of State

Current Principal Place of Business:

2439 N FEDERAL HWY
BOCA RATON, FL 33431

New Principal Place of Business:

22191 POWERLINE RD
SUITE 26 C
BOCA RATON, FL 33433

Current Mailing Address:

2439 N FEDERAL HWY
BOCA RATON, FL 33431

New Mailing Address:

22191 POWERLINE RD
SUITE 26 C
BOCA RATON, FL 33433

FEI Number: 65-0882421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENNIGS, GABRIEL
2439 N FEDERAL HWY
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

SOARES, CAMILA
22191 POWERLINE RD
SUITE 26 C
BOCA RATON, FL 33433 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: CAMILA SOARES

04/10/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HENNIGS, GABRIEL
Address: 2439 N FEDERAL HWY
City-St-Zip: BOCA RATON, FL 33431

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOARES, CAMILA
Address: 22191 POWERLINE RD , SUITE 26 C
City-St-Zip: BOCA RATON, FL 33433

Title: P () Change (X) Addition
Name: SILVA, EVA
Address: 22191 POWERLINE RD , SUITE 26 C
City-St-Zip: BOCA RATON, FL 33433

Title: VP () Change (X) Addition
Name: SOARES, BIANCA
Address: 22191 POWERLINE RD , SUITE 26 C
City-St-Zip: BOCA RATON, FL 33433

Title: D () Change (X) Addition
Name: SOARES, BARBARA
Address: 22191 POWERLINE RD , SUITE 26 C
City-St-Zip: BOCA RATON, FL 33433

Title: D () Change (X) Addition
Name: HENNIGS, GABRIEL
Address: 22191 POWERLINE RD , SUITE 26 C
City-St-Zip: BOCA RATON, FL 33433

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: CAMILA SOARES

P

04/10/2007

Electronic Signature of Signing Officer or Director

Date