

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000026446

Entity Name: TELECEL LATIN AMERICA S.A., INC.

FILED
Jan 19, 2005
Secretary of State

Current Principal Place of Business:

8216 NW 30 TERR
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

8216 NW 30 TERR
#101
MIAMI, FL 33122

New Mailing Address:

8216 NW 30 TERR
MIAMI, FL 33122

FEI Number: 52-2156359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OHEVZION, SAMUEL
8216 NW 30 TERR
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OHEVZION, SAMUEL
Address: 789 CRANDON BLVD., STE. 306
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: OHEVZION, MICHAEL
Address: 789 CRANDON BLVD., STE. 306
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: OHEVZION, RACHEL
Address: 789 CRANDON BLVD., STE. 306
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: OHEVZION, SAMUEL
Address: 21050 NE 38 AVE #2401
City-St-Zip: AVENTURA, FL 33180

Title: O (X) Change () Addition
Name: OHEVZION, MICHAEL
Address: 789 CRANDON BLVD., STE. 306
City-St-Zip: KEY BISCAYNE, FL 33149

Title: O (X) Change () Addition
Name: BEL, RACHEL
Address: 3573 SW 49 PLACE
City-St-Zip: FORT LAUDERDALE, FL 33312

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SAMUEL OHEVZION

OFFI

01/19/2005

Electronic Signature of Signing Officer or Director

Date