2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2004
Secretary of State

DOCUMENT# P99000033449

Entity Name: QUALITY ONE WIRELESS INC.

Current Principal Place of Business:

804 A ERIE DR
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

804 A ERIE DR
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 22-3691848 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIORANDO, JOHN
7151 LAKE ELLENOR DR
ORLANDO, FL 32809 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: CHIORANDO, JOHN
Address: 2208 WESTBOURNE DR
City-St-Zip: OVIEDO, FL 32765

Title: V ( ) Delete
Name: TURNER, VINCENT SCOTT
Address: 317 LOMA DEL SOL DR
City-St-Zip: DAVENPORT, FL 33837

Title: S ( ) Delete
Name: CHIORANDO, MICHAEL
Address: 3244 FALSON POINT DR
City-St-Zip: KISSIMMEE, FL 34741

Title: T ( ) Delete
Name: CUFF, THOMAS
Address: 1315 WEST CHESTER AVE
City-St-Zip: WINTER PARK, FL 32789

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 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: JOHN CHIORANDO PRES 01/08/2004

Electronic Signature of Signing Officer or Director — Date