## 2007 FOR PROFIT CORPORÁTION ANNUAL REPORT

## **DOCUMENT # F06000007119**

1. Entity Name

**TELIOS CORPORATION** 



FILED Jul 06, 2007 08:00 AM Secretary of State

Principal Place of Business

3535 TRAVIS ST SUITE 115 DALLAS, TX 75204 Mailing Address

3535 TRAVIS ST SUITE 115 DALLAS, TX 75204



06072007

No Chg-P

CR2E034 (11/05)

4. FEI Number 01-0726029

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR STE 4 WESTON, FL 33331

## DO NOT WRITE IN THIS SPACE

					THIS STAGE
	named entity submits this statement for the tions of registered agent.	e purpose of changing its regi	stered office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered				required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.  TITLE  NAME  SIREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND DIR P MCCALL, SHANNON K 3535 TRAVIS ST SUITE 115 DALLAS, TX 75204 V PETERSON, BRIAN D 12946 DAIRY ASHFORD #130 SUGAR LAND, TX 77478	ECTORS			U00000767316 07/06/07-80009-010 150.00
THTLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE THIS SPACE
TITLE			1	•	,

12. Thereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental prior to the and accurate and that my 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 flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with specificss, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

16.07

216-744.6199

Daytime Phot