

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003762

FILED  
Jan 30, 2009  
Secretary of State

Entity Name: PULSE COMMUNICATIONS, INC.

## Current Principal Place of Business:

1600 BOSTON-PROVIDENCE HIGHWAY  
SUITE 101  
WALPOLE, MA 02081

## New Principal Place of Business:

## Current Mailing Address:

1600 BOSTON-PROVIDENCE HIGHWAY  
SUITE 101  
WALPOLE, MA 02081

## New Mailing Address:

FEI Number: 04-3311126      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PICARDI, BRIAN  
2121 PONCE DE LEON BLVD - SUITE 525  
MIAMI, FL 33134 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: VD ( ) Delete  
Name: BANSCHBACH, MICHAEL  
Address: 31948 GLOXINIA WAY  
City-St-Zip: LAKE ELSINORE, CA 92532

Title: PDC ( ) Delete  
Name: COSTANTINO, SALVATORE  
Address: 17906 BUNKER HILL RD  
City-St-Zip: PARKTON, MD 21120

Title: S ( ) Delete  
Name: TESSITORE, FRANK W  
Address: 222 HIGHLAND AVE  
City-St-Zip: ARLINGTON, MA 02174

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: BANSCHBACH, MICHAEL  
Address: 31948 GLOXINIA WAY  
City-St-Zip: LAKE ELSINORE, CA 92532

Title: PRES (X) Change ( ) Addition  
Name: COSTANTINO, SALVATORE  
Address: 17906 BUNKER HILL RD  
City-St-Zip: PARKTON, MD 21120

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: SALVATORE COSTANTINO

PRES

01/30/2009

Electronic Signature of Signing Officer or Director

Date