

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90337 003 ***150.00

DOCUMENT # F00000006230

1. Entity Name
GOBEAM SERVICES, INC.



Principal Place of Business
**2001 CROW CANYON RD, STE 150
SAN RAMON, CA 94583**

Mailing Address
**260 N WOLFE RD
SAC
SUNNYVALE, CA 90486**

24047348



2. Principal Place of Business

5050 Hopyard Rd.

Suite, Apt. #, etc.

Ste. 350

City & State

Pleasanton, CA

Zip

94588

Country

USA

3. Mailing Address

Same

Suite, Apt. #, etc.

City & State

Zip

90486

Country

USA

04142004

Chg-P

CR2E034 (10/03)

4. FEI Number

94-3365126

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TCS CORPORATE SERVICES, INC.
103 N. MERIDIAN STREET
TALLAHASSEE, FL 32301-0000**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ Delete

NAME **STEVENSON, ROBERT S**

STREET ADDRESS **260 N WOLFE RD**

CITY-ST-ZIP **SUNNYVALE, CA 94086**

TITLE **VD** ☐ Delete

NAME **STERN, JEFF EXEC VP**

STREET ADDRESS **260 N WOLFE RD**

CITY-ST-ZIP **SUNNYVALE, CA 97086**

TITLE **S** ☒ Delete

NAME **MCMAHON, NANCY SEC**

STREET ADDRESS **2001 CROW CANYON RD, STE 150**

CITY-ST-ZIP **SAN REMO, CA**

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Chairman** ☒ Change ☐ Addition

NAME **Rob Stevenson**

STREET ADDRESS **5050 Hopyard Rd #350**

CITY-ST-ZIP **Pleasanton, CA 94588**

TITLE **Secretary** ☒ Change ☐ Addition

NAME **Terry Murphy**

STREET ADDRESS **5050 Hopyard Rd #350**

CITY-ST-ZIP **Pleasanton, CA 94588**

TITLE **President** ☐ Change ☒ Addition

NAME **Bill Jarvis**

STREET ADDRESS **5050 Hopyard Rd #350**

CITY-ST-ZIP **Pleasanton, CA 94588**

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/04

Date

708-850-6277

Daytime Phone #