

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006235

FILED
May 17, 2004
Secretary of State

Entity Name: FUSION TELECOMMUNICATIONS INTERNATIONAL, INC.

Current Principal Place of Business:

420 LEXINGTON AVENUE, SU 518
NEW YORK, NY 10170

New Principal Place of Business:

Current Mailing Address:

420 LEXINGTON AVENUE, SU 518
NEW YORK, NY 10170

New Mailing Address:

FEI Number: 58-2342021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEITZ, WILLIAM R ESQ.
1415 W. CYPRESS CREEK ROAD SV220
FORT LAUDERDALE, FL 33309 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSEN, MARVIN S
Address: 420 LEXINGTON AVE., STE 518
City-St-Zip: NEW YORK, NY

Title: V () Delete
Name: ROSEN, MATTHEW
Address: 420 LEXINGTON AVE., STE 518
City-St-Zip: NEW YORK, NY

Title: ST () Delete
Name: TURITS, PHILIP D
Address: 420 LEXINGTON AVE., STE 518
City-St-Zip: NEW YORK, NY

Title: VD () Delete
Name: ROSEN, MARVIN S
Address: 420 LEXINGTON AVE., STE 518
City-St-Zip: NEW YORK, NY

Title: CD () Delete
Name: SCHLEICHER, JOEL A
Address: 140 KNIGHTSBRIDGE
City-St-Zip: WATCHUNG, NJ

Title: D () Delete
Name: BAEZ, CESAR A
Address: 219 PEACHWOOD ROAD
City-St-Zip: MIDDLETOWN, NJ 07745

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:

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: MATTHEW ROSEN

PRES

05/17/2004

Electronic Signature of Signing Officer or Director

Date