


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2005 8:00 am
Secretary of State


03-08-2005 90174 025 ***150.00

DOCUMENT # F01000006235	
1. Entity Name FUSION TELECOMMUNICATIONS INTERNATIONAL, INC.	

Principal Place of Business 420 LEXINGTON AVENUE, SU 518 NEW YORK, NY 10170	Mailing Address 420 LEXINGTON AVENUE, SU 518 NEW YORK, NY 10170
--	--

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

40028526



03042005 Chg-P CR2E034 (10/03)

4. FEI Number 58-2342021	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HEITZ, WILLIAM R ESQ. 1415 W. CYPRESS CREEK ROAD SV220 FORT LAUDERDALE, FL 33309	7. Name and Address of New Registered Agent Name: <u>William R. Heitz, Esq.</u> Street Address (P.O. Box Number is Not Acceptable): <u>1475 W. Cypress Creek Road, SU 204</u> City: <u>FORT LAUDERDALE</u> FL Zip Code: <u>33309</u>
--	--

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: William R. Heitz, Esq. DATE: 3/4/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROSEN, MARVIN S 420 LEXINGTON AVE., STE 518 NEW YORK, NY <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO / CHAIRMAN OF THE BOARD DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ROSEN, MATTHEW 420 LEXINGTON AVE., STE 518 NEW YORK, NY <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P / COO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST TURITS, PHILIP D 420 LEXINGTON AVE., STE 518 NEW YORK, NY <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S / T / D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROSEN, MARVIN S 420 LEXINGTON AVE., STE 518 NEW YORK, NY <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SCHLEICHER, JOEL A 140 KNIGHTSBRIDGE WATCHUNG, NJ <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAEZ, CESAR A 219 PEACHWOOD ROAD MIDDLETOWN, NJ 07745 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: William R. Heitz, Esq. as attorney in fact for Fusion Telecommunications Int'l, Inc. **3/4/05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 585-387-0000

ATTACHMENT

40028526

Page 2 of 3

2005 Annual Report Supplement for:
Fusion Telecommunications International, Inc.
Document #: F01000006235

11. Cont.

TITLE: EVP / CTO
NAME: JOEL H. MALOFF
STREET ADDRESS: 1475 W. CYPRESS CREEK ROAD, SU 204
CITY-STATE-ZIP: FORT LAUDERDALE, FLORIDA 33309

TITLE: EVP
NAME: ERIC RAM
STREET ADDRESS: 1475 W. CYPRESS CREEK ROAD, SU 204
CITY-STATE-ZIP: FORT LAUDERDALE, FLORIDA 33309

TITLE: VPF
NAME: BARBARA HUGUES
STREET ADDRESS: 1475 W. CYPRESS CREEK ROAD, SU 204
CITY-STATE-ZIP: FORT LAUDERDALE, FLORIDA 33309

TITLE: EVPS
NAME: JAN SARRO
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170

TITLE: P OF VOIP SALES
NAME: ROGER KARAM
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170

TITLE: D
NAME: E. ALAN BRUMBERGER
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170

TITLE: D
NAME: JULIS ERVING
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170

TITLE: D
NAME: EVELYN LANGLIEB GREER
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170

TITLE: D
NAME: RAYMOND E. MABUS
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170

ATTACHMENT

40028526

#F01000006235

Page 3 of 3

TITLE: D
NAME: MANUEL D. MEDINA
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170

TITLE: D
NAME: PAUL C. O'BRIEN
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170

TITLE: D
NAME: KENNETH I. STARR
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170

TITLE: D
NAME: MICHAEL D. DEL GIUDICE
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170

TITLE: D
NAME: FRED P. HOCHBERG
STREET ADDRESS: 420 LEXINGTON AVENUE, SUITE 518
CITY-STATE-ZIP: NEW YORK, NEW YORK 10170