2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 01, 2006 8:00 am Secretary of State DOCUMENT # F02000002540 1. Entity Name 03-01-2006 90030 047 ***158.75 WDT WORLD DISCOUNT TELECOMMUNICATIONS CO. Mailing Address Principal Place of Business 13644 NEUTRON ROAD DALLAS TX 75244 13644 NEUTRON ROAD DALLAS TX 75244 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Applied For City & State City & State 4. FEI Number 75-2844606 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TCS CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 515 EAST PARK AVENUE TALLAHASSEE FL 32301 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 pristed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1; 10. SECRETARY TREASURER TITLE **PCEO** ☐ Delete TITLE **✓** Addition NAME TALIS, ROMAN TAUS 13644 NEUTRON RA STREET ADDRESS 13644 NEUTRON ROAD STREET ADDRESS DALLAS TX 75244 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75244 TITLE SCOO ☐ Delete TITLE Change | Addition NAME PLOCIENNICZAK, ANDREW STREET ADDRESS STREET ADDRESS 13644 NEUTRON ROAD CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75244 Delete TITLE ☐ Change ■ Addition TITLE MANAG NAME **GUNTORIUS, GEDRIUS** STREET ADDRESS STREET ADDRESS 13644 NEUTRON ROAD CITY-ST-ZIP DALLAS TX 75244 CITY-ST-ZIP ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS 8274 CITY-ST-ZIP MALLAS CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition DTLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this fifting does not qualify for the exemptions contained in Section 119, 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, withall other like empowered.

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