

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003602

Entity Name: TELECOM NORTH AMERICA INC.

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

1802 N. CARSON ST
STE. 212-2683
CARSON CITY, NV 89701

Current Mailing Address:

1802 N. CARSON ST
STE. 212-2683
CARSON CITY, NV 89701

New Principal Place of Business:

1802 N. CARSON ST
STE. 108-2683
CARSON CITY, NV 89701

New Mailing Address:

1802 N. CARSON ST
STE. 108-2683
CARSON CITY, NV 89701

FEI Number: 71-0874698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENTS LEGAL SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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: C () Delete
Name: ROLAND, THIEME
Address: 1802 N. CARSON ST, STE 212-2683
City-St-Zip: CARSON CITY, NV 89701

Title: P () Delete
Name: GOTTSCHALK, JOHANNES
Address: 1802 N. CARSON ST, STE 212-2683
City-St-Zip: CARSON CITY, NV 89701

Title: ST () Delete
Name: ANDRIEU, HERVE
Address: 1802 N. CARSON ST, STE 212-2683
City-St-Zip: CARSON CITY, NV 89701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: HERVE, ANDRIEU
Address: 1802 N. CARSON ST, STE 108-2683
City-St-Zip: CARSON CITY, NV 89701

Title: P (X) Change () Addition
Name: GOTTSCHALK, JOHANNES
Address: 1802 N. CARSON ST, STE 108-2683
City-St-Zip: CARSON CITY, NV 89701

Title: ST (X) Change () Addition
Name: ANDRIEU, HERVE
Address: 1802 N. CARSON ST, STE 108-2683
City-St-Zip: CARSON CITY, NV 89701

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: HERVE ANDRIEU

C

03/19/2009

Electronic Signature of Signing Officer or Director

Date