## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000004087

Entity Name: XFONE USA, INC.

FILED Jul 19, 2006 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
SUITE 100	ELAND DRIVE , MS 39232				
Current Mailing Address:			New Mailing Address:		
SUITE 100	ELAND DRIVE , MS 39232				
FEI Number:	20-1298693	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
INCORP S 18450 NE : MIAMI, FL					
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUF	RE:				
	Electroni	c Signature of Registered Age	ent	Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SPOONER, WAI	DRIVE SUITE 100	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PARSONS, TED	Delete DRIVE SUITE 100 39232	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DUNN, LISA	Delete DRIVE SUITE 100 39232	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: WADE SPOONER PC 07/19/2006