

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004957

Entity Name: TELEMESAGE, INC.

FILED
Feb 19, 2009
Secretary of State

Current Principal Place of Business:

468 GREAT ROAD
ACTON, MA 01720

New Principal Place of Business:

Current Mailing Address:

468 GREAT ROAD
ACTON, MA 01720

New Mailing Address:

FEI Number: 04-3519699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: EXD () Delete
Name: LEVIT, GUY
Address: 8 GRANIT STREET KIRUAT ARIE
City-St-Zip: PETACH-TIKVA, 49222

Title: D () Delete
Name: FISHMAN, IVAN
Address: 58-60 BERNERS STREET
City-St-Zip: LONDON WIT 3JS, UK,

Title: D () Delete
Name: SIMMONDS, GEOFFREY
Address: 58-60 BERNERS STREET
City-St-Zip: LONDON WIT 3JS, UK,

Title: D () Delete
Name: FURMAN, HORACIO
Address: 8 GRANIT STREET, KIRYAT ARIE
City-St-Zip: PETACH-TIKVA, 49222

Title: D () Delete
Name: RUBNER, DAVID
Address: 8 GRANIT STREET, KIRYAT ARIE
City-St-Zip: PETACH-TIKVA, 49222

Title: V () Delete
Name: CARLIN, MARK
Address: 468 GREAT ROAD
City-St-Zip: ACTION, MA 01720

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 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: MARK CARLIN

VP

02/19/2009

Electronic Signature of Signing Officer or Director

Date