2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004967

Entity Name: AEGIS COMMUNICATIONS GROUP, INC.

FILED Sep 06, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
8001 BENT BRANCH DR IRVING, TX 75063				8201RIDGEPOINT DRIVE IRVING, TX 75063		
Current Mailing Address:				New Mailing Address:		
8001 BEN IRVING, T	T BRANCH DF X 75063	₹				
FEI Number:	: 75-2050538	FEI Number Applied For ()	FEI Numl	ber Not Appli	licable () Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	I	Name and	Address of New Registered Agent:	
1201 HAYS TALLAHAS The above	SST SSEE, FL 323		ırpose of	changing it	its registered office or registered agent, or both,	
SIGNATUF						
		nic Signature of Registered Ager	nt		Date	
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip: Title:	HUGGINS, CHU 8001 BENT BR IRVING, TX 75	ANCH DR	1	Title: Name: Address: City-St-Zip: Title:	V (X) Change () Addition HUGGINS, CHUNG 8201 RIDGEPOINT DRIVE IRVING, TX 75063 V (X) Change () Addition	
Name: Address: City-St-Zip:	BROOKS, CON 8001 BENT BR IRVING, TX 75	ANCH DR	,	Name: Address: City-St-Zip:	LATRISHA, NORRIS 8201 RIDGEPOINT DRIVE IRVING, TX 75063	
Title: Name: Address: City-St-Zip:	PCEO () RAMASAMY, K 8001 BENT BR IRVING, TX 75	ANCH DR	1	Title: Name: Address: City-St-Zip:	D (X) Change () Addition RAMASAMY, KANNAN 8001 BENT BRANCH DR IRVING, TX 75063	
Title: Name: Address: City-St-Zip:	D (X RAMASAMY, K 8001 BENT BR IRVING, TX 75	ANCH DR	1	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S (X RASTOGIY, DE 8001 BENT BR IRVING, TX 75	ANCH DR	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () FERRY, RICHA 8001 BENT BR IRVING, TX 75	ANCH DR	1	Title: Name: Address: City-St-Zip:	CEO (X) Change () Addition FERRY, RICHARD N 8201 RIDGEPOINT DRIVE IRVING, TX 75063	

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: LATRISHA NORRIS VP 09/06/2007