

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000680

Entity Name: NET-COM SERVICES, INC.

FILED
Aug 26, 2009
Secretary of State

Current Principal Place of Business:

29069 AVENUE PENN
VALENCIA, CA 91355

New Principal Place of Business:

27305 W LIVE OAK RD. UNIT A
PMB 609
CASTAIC, CA 91384

Current Mailing Address:

29069 AVENUE PENN
VALENCIA, CA 91355

New Mailing Address:

27305 W LIVE OAK RD. UNIT A
PMB 609
CASTAIC, CA 91384

FEI Number: 95-4765615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOFFATT, BRANT
Address: 26007 HUNTINGTON LANE, SUITE 9
City-St-Zip: VALENCIA, CA 91355

Title: T () Delete
Name: MOFFATT, BRANT
Address: 26007 HUNTINGTON LANE, SUITE 9
City-St-Zip: VALENCIA, CA 91355

Title: S () Delete
Name: MOFFATT, CHERYL
Address: 3100 CEDAR STREET, UNIT 22
City-St-Zip: ONTARIO, CA 91761

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:

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: BRANT MOFFATT

P

08/26/2009

Electronic Signature of Signing Officer or Director

Date