

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003196

FILED
Mar 04, 2011
Secretary of State

Entity Name: ADCAP NETWORK SYSTEMS, INC.

Current Principal Place of Business:

999 PONCE DEO LEON BLVD., SUITE 915
CORAL GABLES, FL 33134

New Principal Place of Business:

999 PONCE DE LEON BLVD., SUITE 915
CORAL GABLES, FL 33134

Current Mailing Address:

999 PONCE DEO LEON BLVD., SUITE 915
CORAL GABLES, FL 33134

New Mailing Address:

6525 SHILOH ROAD, STE D-700
ALPHARETTA, GA 30005

FEI Number: 37-1423912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OBESO, ALEJANDRO J
999 PONCE DEO LEON BLVD., SUITE 915
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

OBESO, ALEJANDRO J
999 PONCE DE LEON BLVD., SUITE 915
CORAL GABLES, FL 33134 US

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:

03/04/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: VERSLUIS, ROLF
Address: 6525 SHILOH RD., STE D-700
City-St-Zip: ALPHARETTA, GA 30005

Title: DIR
Name: VERSLUIS, CHRISTINE
Address: 6525 SHILOH RD., STE D-700
City-St-Zip: ALPHARETTA, GA 30005

Title: PRES
Name: WARING, MATTHEW P
Address: 6525 SHILOH RD., STE D-700
City-St-Zip: ALPHARETTA, GA 30005

I hereby 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 all other like empowered.

SIGNATURE: MATTHEW P. WARING

PRES

03/04/2011

Electronic Signature of Signing Officer or Director

Date