2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003995

Entity Name: STARTEC GLOBAL OPERATING COMPANY

FILED Mar 03, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
7361 CALHOUN PL STE 650 ROCKVILLE, MD 20855						
Current Mailing Address:				New Mailing Address:		
7361 CALHOUN PL STE 650 ROCKVILLE, MD 20855				C/O PLATINUM EQUITY 360 N. CRESCENT DR., SOUTH BUILDING BEVERLY HILLS, CA 90210		
FEI Number: 52-2099558 FEI Number Applied For () FEI Num			nber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US				C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: C T CORPORATION SYSTEM				03/03/2009		
	Electroni	c Signature of Registered Agent	t			Date
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () I PEREZ, TOMAS 7361 CALHOUN ROCKVILLE, ME	PL STE 650		Title: Name: Address: City-St-Zip:	P (X) Ch TAYLOR, CHARLES 7361 CALHOUN PL ROCKVILLE, MD 2	STE 650
Title: Name: Address: City-St-Zip:	KALAWSKI, EVA	IT DR SOUTH BLDG		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition
Title: Name: Address: City-St-Zip:	JOUBRAN, ROB	IT DR SOUTH BLDG		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition
Title: Name: Address: City-St-Zip:	SIGLER, MARY	IT DR SOUTH BLDG		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition
Title: Name: Address: City-St-Zip:	WARD, SALLY A	IT DR SOUTH BLDG		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition
Title: Name: Address: City-St-Zip:	WALLOCH, DAV	IT DR SOUTH BLDG		Title: Name: Address: City-St-Zip:	() Cha	ange () Addition

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: SALLY A. WARD AS 03/03/2009