

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006339

FILED
Apr 04, 2006
Secretary of State

Entity Name: SIEMENS COMMUNICATIONS, INC.

Current Principal Place of Business:

900 BROKEN SOUND PKWY.
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

C/O SIEMENS CORPORATION
170 WOOD AVENUE SOUTH
ISELIN, NJ 08830

New Mailing Address:

FEI Number: 52-2122392 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEO () Delete
Name: MATTES, ANDREAS
Address: 1756 2171 HOFFMANNSTR 51
City-St-Zip: MUNICH, GERMANY, 81359

Title: D () Delete
Name: MEINZER, ROLAND
Address: 900 BROKEN SOUND PKWY
City-St-Zip: BOCA RATON, FL 33487

Title: S () Delete
Name: HEITH, COCY D
Address: 900 BROKEN SOUND PARKWAY
City-St-Zip: BOCA RATON, FL 33487

Title: D () Delete
Name: STEGEMANN, KLAUS
Address: 153 E 53RD ST
City-St-Zip: NEW YORK, NY 10022

Title: D (X) Delete
Name: KUTSCHENNEUTER, MICHAEL
Address: HAFMANNSTR. 51
City-St-Zip: MUNICH GERMANY, 81359

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: BAUMGARTL, BERNDT
Address: 900 BROKEN SOUND PARKWAY
City-St-Zip: BOCA RATON, FL 33487

Title: D (X) Change () Addition
Name: BAUMGARTL, BERNDT
Address: 900 BROKEN SOUND PKWY
City-St-Zip: BOCA RATON, FL 33487

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: STUMPF, HERIBERT
Address: 153 E 53RD ST
City-St-Zip: NEW YORK, NY 10022

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS () Change (X) Addition
Name: GOTLIFFE, ALAN
Address: 170 WOOD AVE. SOUTH
City-St-Zip: ISELIN, NJ 08830

I hereby certify that the information supplied with this filing does not qualify for the 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: ALAN GOTLIFFE

AS

04/04/2006

Electronic Signature of Signing Officer or Director

_____ Date