

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K61784

FILED
Jan 31, 2006
Secretary of State

Entity Name: RJE TELECOM, INC.

Current Principal Place of Business:

100 WEST SIXTH STREET
SUITE 300
MEDIA, PA 19063

New Principal Place of Business:

Current Mailing Address:

C/O WILLIAM H. MULLER
100 WEST SIXTH STREET SUITE 300
MEDIA, PA 19063

New Mailing Address:

FEI Number: 65-0925891 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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: D () Delete
Name: HELWIG, DAVID R
Address: 100 WEST SIXTH STREET
City-St-Zip: MEDIA, PA 19063

Title: AS () Delete
Name: MULLER, WILLIAM H
Address: 100 WEST SIXTH STREET
City-St-Zip: MEDIA, PA 19063

Title: EVP () Delete
Name: COLEMAN, LAWRENCE
Address: 202 TITUS AVE
City-St-Zip: WARRINGTON, PA 18976

Title: T () Delete
Name: MONTGOMERY, TERENCE R
Address: 100 WEST SIXTH STREET
City-St-Zip: MEDIA, PA 19063

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIRE (X) Change () Addition
Name: HELWIG, DAVID R
Address: 100 WEST SIXTH STREET
City-St-Zip: MEDIA, PA 19063

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

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

Title: TREA (X) Change () Addition
Name: MONTGOMERY, TERENCE R
Address: 100 WEST SIXTH STREET
City-St-Zip: MEDIA, PA 19063

Title: SECR () Change (X) Addition
Name: DEBORAH, LOFTON C
Address: 100 WEST SIXTH STREET
City-St-Zip: MEDIA, PA 19063

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: WILLIAM H. MULLER

AS

01/31/2006

Electronic Signature of Signing Officer or Director

_____ Date