## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## DIVISION OF CORPORATIONS **DOCUMENT # K89099** 1. Entity Name TELCOM SYSTEMS, INC. 06 JAN 19 AM 9:12 Principal Place of Business Mailing Address JAMES E. SPISIAK JAMES E. SPISIAK 450 NE 1ST ROAD 450 NE 1ST ROAD HOMESTEAD, FL 33030-6134 HOMESTEAD, FL 33030-6134 01052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable 衵 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPISIAK, JAMES E. DO NOT WRITE 450 NE 1ST ROAD HOMESTEAD, FL 33030-6134 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME SPISIAK, JAMES E. STREET ADDRESS 450 NE 1ST ROAD CITY-ST-ZIP HOMESTEAD, FL 330306134 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7IP TITLE STREET ADORESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

James E. Spisiak 1/5/2006

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