



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # K89099 1. Entity Name TELCOM SYSTEMS, INC.			
Principal Place of Business JAMES E. SPISIAK 450 NE 1ST ROAD HOMESTEAD, FL 33030-6134		Mailing Address JAMES E. SPISIAK 450 NE 1ST ROAD HOMESTEAD, FL 33030-6134	
DO NOT WRITE IN THIS SPACE			
		01082007 No Chg-P CR2E034 (11/05)	
		4. FEI Number NOT APPLICABLE	Applied For Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			
SPISIAK, JAMES E. 450 NE 1ST ROAD HOMESTEAD, FL 33030-6134		DO NOT WRITE 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.			
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPISIAK, JAMES E. 450 NE 1ST ROAD HOMESTEAD, FL 330306134		
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		U000000602688 01/26/07-80098-020 667.50	
		DO NOT WRITE IN THIS SPACE	
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.			
SIGNATURE: <u>James E. Spisak</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		01/15/07 Date	305-245-4511 Daytime Phone If