


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 15, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000002909 1. Entity Name TIER ONE COMMUNICATIONS LLC	
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Principal Place of Business 2003 WEST CYPRESS CREEK RD., STE. 107 FT LAUDERDALE, FL 33309	Mailing Address 2003 WEST CYPRESS CREEK RD., STE. 107 FT LAUDERDALE, FL 33309
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DO NOT WRITE IN THIS SPACE



02162005No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1077987	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

OSBORNE, JOSEPH A
2005 WEST CYPRESS CREEK RD.
STE 205
FORT LAUDERDALE, FL 33309

**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 reinstating)
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

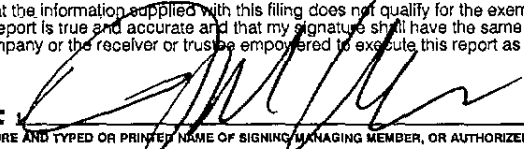
**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR OSBORNE, JOSEPH A 2003 WEST CYPRESS CREEK RD., STE. 107 FT LAUDERDALE, FL 33309
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03/15/05-80011-001 150.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **3/10/05 954-771-0403**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #