2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P0000004680

Entity Name: TELNETWORKS INC.

FILED Jan 15, 2002 8:00 AM Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
300 S HYDE PARK AVE TAMPA, FL 33606				5550 W. IDLEWILD AVENUE BUILDING D, SUITE 150-B TAMPA, FL 33634		
Current Mailing Address:				New Mailing Address:		
300 S HYDE PARK AVE TAMPA, FL 33606				301 W. PLATT STREET SUITE A, #131 TAMPA, FL 33606		
FEI Number: 59-3627451 FEI Number Applied For () FEI Number				mber Not Applicable () Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Registered Agent:
1000 WES NO. 1114 MIAMI BEA		90000 US	rpose o	f changing i	ts registered	office or registered agent, or both,
SIGNATUR	RE:					
	Electron	ic Signature of Registered Agent	t			Date
This corporation is eligible to satisfy its Intangible Tax filing requirement Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ement a	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	GUSTUM, AARO 3906 BROOMS VALRICO, FL 3	EDGE LANE 13594		Title: Name: Address: City-St-Zip:	GUSTUM, AAF 3906 BROOM VALRICO, FL	SEDGE LANE 33594 US
Title: Name: Address: City-St-Zip:	T () BRITTON, GRE- 6202 SHELDON TAMPA, FL 336	I RD, APT 716		Title: Name: Address: City-St-Zip:	LETTIERO, LE	ITS SQUARE DRIVE
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	RAPP, DENNI 206 16TH AVE	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D (EDWARDS, G 3906 LITHIA R BRANDON, FL	RIDGE BLVD.
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D (BRITTON, GR 6202 SHELDO TAMPA, FL 33	ON ROAD
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	DAWSON, ALA 3553 FAIRWA) Change (X) Addition AN Y FOREST DRIVE R, FL 34685 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AARON R. GUSTUM P 01/15/2002