2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000029845

FILED Feb 10, 2005 Secretary of State

Entity Name: ADVANCED TELECOMMUNICATION & NETWORKING TECHNOLOGIES, INC.

| Current P | rincipal Place | of Business: | New Princ | pal Place of Business: | |
|---|--|--|---|--|---------------------------|
| | JAMES AVENUE LE, FL 32780 | Ē | | | |
| Current M | lailing Address | : | New Mailir | ıg Address: | |
| SUITE 101 | I AVENUE SOU I-456 FL 34102 | TH | | | |
| FEI Number | : 62-1807641 | FEI Number Applied For () | FEI Number Not Appli | cable () Certificate o | f Status Desired () |
| Name and | l Address of Cu | ırrent Registered Agent: | Name and | Address of New Registe | ered Agent: |
| TITUSVILI The above | AMES AVENUE LE, FL 32780 | US ubmits this statement for the p | ourpose of changing it | s registered office or regis | stered agent, or both, |
| n the State | | | | | |
| | e of Florida. | | | | |
| in the State | e of Florida. * RE: | c Signature of Registered Age | ent | Dat | e |
| SIGNATU | e of Florida. ÉRE: Electronic | c Signature of Registered Age Trust Fund Contribution (). | ent | Dat | e |
| SIGNATUI | e of Florida. ÉRE: Electronic | Trust Fund Contribution (). | | Dat S/CHANGES TO OFFICE | |
| SIGNATUI Election Cal OFFICER Title: Name: Address: | e of Florida. RE: Electronic mpaign Financing S AND DIRECT | Trust Fund Contribution (). ORS: Delete N TRAIL | | | ERS AND DIRECTOR |
| SIGNATUI | e of Florida. RE: Electronic mpaign Financing S AND DIRECT S ()I WARREN, LOGA 105 TECUMSEH JACKSONVILLE, | Trust Fund Contribution (). ORS: Delete N TRAIL AR 72076 Delete LE E | ADDITION Title: Name: Address: | S/CHANGES TO OFFICE | ERS AND DIRECTOR |
| Election Car OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: | e of Florida. RE: Electronic mpaign Financing S AND DIRECT S () I WARREN, LOGA 105 TECUMSEH JACKSONVILLE, P () I EDDLEMON, AR 2309 LINDA LAN JACKSONVILLE, | Trust Fund Contribution (). ORS: Delete N TRAIL AR 72076 Delete LE E AR 72076 Delete | ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address: | S/CHANGES TO OFFICE () Change () A P (X) Change () A EDDLEMON, MARLEEN 2309 LINDA LANE | ERS AND DIRECTOR addition |

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: RON DAVIS T 02/10/2005