2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000081647

FONSECA, JORGE R

11858 SW, 97 TERRA

MIAMI, FL 33186

Name:

Address:

City-St-Zip:

FILED Mar 21, 2005 Secretary of State

Entity Nar	ne: AYCO Ni	ETWORKS, INC.					
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
399 CARR WESTON,	INGTON DR FL 33326		953 S.W. (MIAMI, FL				
Current Mailing Address:			New Maili	New Mailing Address:			
62 INDIAN WESTON,	TRACE, #288 FL 33326						
FEI Number:	65-1048164	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired	1()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
	, CALIXTO E INGTON DR FL 33326	US					
	named entity e of Florida.	submits this statement for the	ourpose of changing	its registere	d office or registered agent, o	or both,	
SIGNATUR	RE:						
	Electron	nic Signature of Registered Ag	ent		Date		
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DP (SANCHEZ, CAI 399 CARRING WESTON, FL	ON DR	Title: Name: Address: City-St-Zip:		() Change() Addition		
Title: Name: Address: City-St-Zip:	SANCHEZ, ALE	EBLUE BLVD, APTO 405	Title: Name: Address: City-St-Zip:	,	(X) Change () Addition ALEJANDRO 97TH TERRACE 33186		
Title: Name: Address: City-St-Zip:	SD (RODRIGUEZ, I 399 CARRING WESTON, FL	ON DR	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title:	DV () Delete	Title:	DV	(X) Change () 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.

Name:

Address:

City-St-Zip:

FONSECA, JORGE R

MIAMI, FL 33186

11858 SW 97TH TERRACE

SIGNATURE: ALEJANDRO SANCHEZ DV 03/21/2005