


FILED  
May 14, 2003 8:00 am  
Secretary of State

05-14-2003 90141 017 \*\*\*150.00

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # <i>P01000066221</i>	
1. Entity Name <i>TeleCom Training Solutions, Inc.</i>	

**DO NOT WRITE IN THIS SPACE**

90134634

2. Principal Place of Business <i>7863 9th Ave So</i>	3. Mailing Address <i>7863 9th Ave So</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State <i>St. Petersburg, FL</i>	City & State <i>St. Petersburg, FL</i>
Zip <i>33707</i>	Zip <i>33707</i>
County <i>Pinellas</i>	County <i>Pinellas</i>

DO NOT WRITE IN THIS SPACE

<b>DO NOT WRITE IN THIS SPACE</b>	4. FEI Number <i>59-3731271</i>		Applied For <input type="checkbox"/>
			Not Applicable <input type="checkbox"/>
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
	Name <i>Karen Grubbe</i>		
	Street Address (P.O. Box Number is Not Acceptable) <i>4605 Mirabella Place</i>		
	City <i>Lutz</i>	FL	Zip Code <i>33558</i>

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

*Jack Barry*

(NOTE: Registered Agent signature required when reinstating)

*5/12/03*

DATE

January 1 - May 1 Fee Is \$150.00

After May 1; Fee Is \$550.00

Amended UBR Is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>President Mary E. Barry 7863 9th Ave So St. Petersburg, FL 33707</i>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>Treasurer Jack T. Barry 7863 9th Ave So St. Petersburg, FL 33707</i>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

90134634

Attachment

#P01000066271

**T**  
**T**  
**S**  
**TeleCom Training Solutions**  
System Design - Programming - Training  
Serving the Telephone Industry for Over 22 Years

May 12, 2003

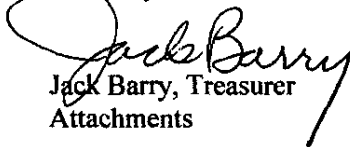
Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Gentlemen:

This letter is written per my telephone call made to you today. Since I did not receive this years "For Profit Corporation Uniform Business Report (UBR), I downloaded the form per your instructions.

Enclosed is the completed form and a check for \$150.00, payable to Florida Department of State.

Sincerely

  
Jack Barry, Treasurer  
Attachments