

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000056842

FILED  
May 27, 2005  
Secretary of State

Entity Name: TELCOM PROFESSIONALS AGENT CENTER, INC.

## Current Principal Place of Business:

2863 EXECUTIVE PARK DR.  
103  
WESTON, FL 33331

## New Principal Place of Business:

## Current Mailing Address:

517 SW FIRST AVE  
FT LAUDERDALE, FL 33301

## New Mailing Address:

PO BOX 267484  
WESTON, FL 33326

FEI Number: 81-0553657

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARUSI, DANIEL S ESQ.  
517 SW FIRST AVE  
FT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

CAPUOZZO, JOSEPH  
960 SW 150TH AVE  
SUNRISE, FL 33326 US

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.

SIGNATURE: JOSEPH CAPUOZZO

05/27/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: CAPUOZZO, JOSEPH  
Address: 520 BONAVENTURE BLVD.  
City-St-Zip: WESTON, FL 33326

Title: VP (X) Delete  
Name: CAPUOZZO, TAMMY  
Address: 520 BONAVENTURE BLVD.  
City-St-Zip: WESTON, FL 33326

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: CAPUOZZO, JOSEPH  
Address: 960 SW 150TH AVE  
City-St-Zip: SUNRISE, FL 33326

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSEPH CAPUOZZO

PST

05/27/2005

Electronic Signature of Signing Officer or Director

Date