

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000118340

Entity Name: BAYTECH NETWORK SOLUTIONS, INC.

FILED  
Jan 19, 2009  
Secretary of State

## Current Principal Place of Business:

3350 ULMERTON ROAD - SUITE 11  
CLEARWATER, FL 33762

## New Principal Place of Business:

## Current Mailing Address:

3350 ULMERTON ROAD - SUITE 11  
CLEARWATER, FL 33762

## New Mailing Address:

FEI Number: 30-0124743

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MIZIO, ARMANDO F  
25400 U.S. HWY 19 NORTH  
SUITE 210  
CLEARWATER, FL 33763 US

## Name and Address of New Registered Agent:

MIZIO, ARMANDO F  
25400 U.S. HWY 19 NORTH  
SUITE 225  
CLEARWATER, FL 33763 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:

01/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: LICASTRI, MARIO  
Address: 1202 MANDERLEE PLACE  
City-St-Zip: TRINITY, FL 34655

Title: VSD ( ) Delete  
Name: DUNHAM, TROY A  
Address: 9009 55TH WAY NORTH  
City-St-Zip: PINELLAS PARK, FL 33782

Title: VSD ( ) Delete  
Name: LICASTRI, MARYANN  
Address: 1202 MANDERLEE PLACE  
City-St-Zip: TRINITY, FL 34655

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARIO LICASTRI

PTD

01/19/2009

Electronic Signature of Signing Officer or Director

Date