2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000131348

City-St-Zip:

LOXAHATCHEE, FL 33470

Entity Name: INTEGRATED TELCOM, INC.

FILED Feb 05, 2007 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
1501 SE D STUART,	DECKER AVE. FL 34994	, STE. 125		
Current Mailing Address:			New Mailing Address:	
1501 SE D STUART,	DECKER AVE. FL 34994	, STE. 125		
FEI Number: 81-0581302 FEI Number Applied For ()		FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
1036 SW 2	E, THOMAS C 29TH. TERRA Y, FL 34990			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	I office or registered agent, or both,
SIGNATUI	RE:			
Electronic Signature of Registered Agent			ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P (GAMACHE, TH 1036 SW 29TH PALM CITY, FI	I. TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V (GAMACHE, MI 1148 SW 33RI PALM CITY, FI	OST.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	ST (GLOAD, RICHA 16235 76TH S		Title: Name: Address:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: THOMAS C GAMACHE P 02/05/2007