2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000092632

Entity Name: VISION TELECOMM INC.

FILED Mar 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

200 S. ANDREWS AVE. 200 S. ANDREWS AVE.

9TH FLOOR SUITE 102

FORT-LAUDERDALE, FL 33301 US FORT-LAUDERDALE, FL 33301 US

Current Mailing Address: New Mailing Address:

200 S. ANDREWS AVE. 200 S. ANDREWS AVE.

9TH FLOOR SUITE 102

FORT-LAUDERDALE, FL 33301 US FORT-LAUDERDALE, FL 33301 US

FEI Number: 20-0176588 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BENYOSEF, SHMUEL
200 S. ANDREWS AVE.
200 S. ANDREWS AVE.

9TH FLOOR SUITE 102

FORT-LAUDERDALE, FL 33301 US FORT-LAUDERDALE, FL 33301 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: 03/27/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition

Name: BENYOSEF, SHMUEL Name: BENYOSEF, SHMUEL

Address: 200 S. ANDREWS AVE. 9TH FLOOR Address: 200 S. ANDREWS AVE. SUITE 102 City-St-Zip: FORT-LAUDERDALE, FL 33301 US FORT-LAUDERDALE, FL 33301 US

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: HATCHWELL, GUY Name: HATCHWELL, GUY

Address: 200 S. ANDREWS AVE. Address: 200 S. ANDREWS AVE., SUITE 102
City-St-Zip: FORT-LAUDERDALE, FL 33301 US City-St-Zip: FORT-LAUDERDALE, FL 33301 US

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: SHMUEL BENYOSEF PSTD 03/27/2008