2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000048111

Entity Name: TOTAL TELECOM SOLUTIONS, INC.

Jul 11, 2005 Secretary of State

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

4996 N CITATION DR STE 106 4996 N CITATION DR

DELRAY BEACH, FL 33445 STE 106

DELRAY BEACH, FL 33445

Current Mailing Address: New Mailing Address:

4996 N CITATION DR STE 106 4996 N CITATION DR

DELRAY BEACH, FL 33445 STE 106

DELRAY BEACH, FL 33445

BERMAN, GARY B

4996 N CITATION DR

FEI Number: 20-0875786 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:

LAW OFFICES OF STEPHEN G. MELCER 4800 N FEDERAL HWY STE 300-D BOCA RATON, FL 33431

#106 DELRAY BEACH, FL 33445 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: GARY B, BERMAN 07/11/2005

> 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:

CORAL SPRINGS, FL 33071

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DELRAY BEACH, FL 33484

Title: PSD () Delete () Change () Addition

BERMAN, GARY Name: Name: 4996 N CITATION DR STE 106 Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip:

Title: Title: () Delete (X) Change () Addition Name: MORDIS, MICHAEL Name: DODSON, ROBERT G 10858 CYPRESS GLEN DR 5315-48 MONTEREY CIRCLE Address: Address:

City-St-Zip: Title: (X) Change () Addition Title: () Delete TD

MORDIS, MICHAEL Name: DODSON, ROBERT G Name: 10858 CYPRESS GLEN DR 5315-48 MONTEREY CIRCLE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: DELRAY BEACH, FL 33484

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: GARY B BERMAN **PSD** 07/11/2005