

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000064269

FILED
Jun 27, 2006
Secretary of State**Entity Name:** NETWORK TELECOM SOLUTIONS, INC.**Current Principal Place of Business:**118 HONEYWOOD DRIVE
KISSIMMEE, FL 34743**New Principal Place of Business:**916 WOODSIDE CIRCLE
#E
KISSIMMEE, FL 34741**Current Mailing Address:**118 HONEYWOOD DRIVE
KISSIMMEE, FL 34743**New Mailing Address:**916 WOODSIDE CIRCLE
#E
KISSIMMEE, FL 34741**FEI Number:** 55-0895089**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CINTRON, EFREN E JR
118 HONEYWOOD DRIVE
KISSIMMEE, FL 34743 US**Name and Address of New Registered Agent:**LEON, ANA G
916 WOODSIDE CIRCLE
#E
KISSIMMEE, FL 34741 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: ANA G. LEON

06/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: CINTRON, EFREN E JR
Address: 118 HONEYWOOD DRIVE
City-St-Zip: KISSIMMEE, FL 34743**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: LEON, ANA G
Address: 916 WOODSIDE CIRCLE
City-St-Zip: KISSIMMEE, FL 34741

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.

SIGNATURE: ANA G. LEON

P

06/27/2006

Electronic Signature of Signing Officer or Director

Date