

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000112569

Entity Name: TELLFON INC

FILED
Mar 27, 2008
Secretary of State

Current Principal Place of Business:

200 S. ANDREWS AVENUE, 9TH FLOOR
FT. LAUDERDALE, FL 33301

Current Mailing Address:

200 S. ANDREWS AVENUE, 9TH FLOOR
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

200 S. ANDREWS AVENUE,
SUITE 102
FT. LAUDERDALE, FL 33301

New Mailing Address:

200 S. ANDREWS AVENUE
SUITE 102
FT. LAUDERDALE, FL 33301

FEI Number: 20-8142556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENYOSEF, SHMUEL
200 S. ANDREWS AVENUE, 9TH FLOOR
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

BENYOSEF, SHMUEL
200 S. ANDREWS AVENUE
SUITE 102
FT. 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:

Title: PSD () Delete
Name: BENYOSEF, SHMUEL
Address: 200 S. ANDREWS AVENUE, 9TH FLOOR
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VD () Delete
Name: HOVA, MENASHE
Address: 200 S. ANDREWS AVENUE, 9TH FLOOR
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: TD () Delete
Name: HATCHWELL, GUY
Address: 200 S. ANDREWS AVENUE, 9TH FLOOR
City-St-Zip: FT. LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: BENYOSEF, SHMUEL
Address: 200 S. ANDREWS AVENUE, SUITE 102
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VD (X) Change () Addition
Name: HOVA, MENASHE
Address: 200 S. ANDREWS AVENUE, SUITE 102
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: TD (X) Change () Addition
Name: HATCHWELL, GUY
Address: 200 S. ANDREWS AVENUE, SUITE 102
City-St-Zip: FT. LAUDERDALE, FL 33301

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

PSD

03/27/2008

Electronic Signature of Signing Officer or Director

Date