2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19741

Entity Name: INFONET SERVICES CORPORATION

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
2160 E GRA	AND AVE DO, CA 90245	8022					
Current Mailing Address:				New Mailing Address:			
2160 E GRAND AVE EL SEGUNDO, CA 902458022				7301 N STATE HIGHWAY 161 SUITE 400 SOUTH IRVING, TX 75039			
FEI Number: 95-4148675 FEI Number Applied For () FEI Number				nber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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:							
Electronic Signature of Registered Agent						Date	
		Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	DIR () Delete BOUSTRIDGE, MICHAEL 2729 WELBORNE STREET, DALLAS, TX 75219			Title: Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	DIR ()[COLLAZO, JOSE 2160 EAST GRAI EL SEGUNDO, C	ND AVENUE		Title: Name: Address: City-St-Zip:	ANDREW, DAV 2 PARK STREE		
Title: Name: Address: City-St-Zip:	DIR () I DIBBO, JAMES M 2160 EAST GRA EL SEGUNDO, C	ND AVENUE		Title: Name: Address: City-St-Zip:	DCFO (X) DIBBO, JAMES 2160 EAST GR. EL SEGUNDO,	AND AVENUE	
Title: Name: Address: City-St-Zip:	NEWELL, JAMIE	CUT AVENUE, NW SUITE 720		Title: Name: Address: City-St-Zip:	NEWELL, JAMI	HIGHWAY 161 SUITE 400	
Title: Name: Address: City-St-Zip:	AS () I MUNRO, ANDRE 2160 E. GRAND EL SEGUNDO, C	AVE.		Title: Name: Address: City-St-Zip:	MUNRO, ANDR	ICH PARKWAY SUITE 360	
Title: Name: Address: City-St-Zip:	DIR (X) I SPENCE, COLIN 1104 WATER PO RESTON, VA 20	DINTE LANE		Title: Name: Address: City-St-Zip:	()) Change ()Addition	

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: JAMIE NEWELL S 04/30/2009