2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008
Secretary of State

DOCUMENT# P95000024597

Entity Name: NETWORK ONE COMMUNICATIONS, INC.

Current Principal Place of Business:

13302 WINDING OAKS CT
SUITE A
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

PO BOX 273076
TAMPA, FL 33688

New Mailing Address:

FEI Number: 59-3313878 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WETMORE, MARYANN C
13302 WINDING OAKS COURT
SUITE A
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

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

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:

Title: PS ( ) Delete
Name: WETMORE, MARYANN
Address: 13302 WINDING OAKS CT
City-St-Zip: TAMPA, FL 33612

Title: D ( ) Delete
Name: HOWARD, DEE W
Address: 13302 WINDING OAKS CT
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MARYANN WETMORE PS 05/05/2008

Electronic Signature of Signing Officer or Director — Date