2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2008 08:00 A Secretary of State

DOCUMENT # P95000031288 1. Entity Name TELLNET COMMUNICATIONS, INC.							
Mailing Address							
7611 EHRLICH RD. TAMPA, FL 33625							
	NS, INC. Mailing Address 7611 EHRLICH RD.						

			- CON 19			
Principal Plac		Mailing Address 7611 EHRLICH RD.			,	
TAMPA, FL		TAMPA, FL 33625				
				04112008	No Chg-P C	CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE		CE	4. FEI Number		Applied For	
				5 9-331	<i>+</i> _	Not Applicable
.=	6. Name and Address of Current Reg	gistered Agent		5. Certificate	of Status Desired	Fee Required
HART, NATHAN C 7611 EHRLICH RD. TAMPA, FL 33625			DO NOT WRITE IN THIS SPACE			
R The above	named entity submits this statement for the	o numbee of channing its registers	ad office or regis	stered agent, or ho	th in the State of Florida	Lam familiar with and accept
	ions of registered agent.	s purpose of changing its registere	ad office of regis	stered agent, or but	in the diale of Florida.	Turriarinar Will, and accopt
SIGNATURE	Signature, typed or printed name of registered agent and t	the if applicable (NOTE, Registered	d Agent signati. e requ	ured when reinstating)		DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Selection Campaign Finan Trust Fund Contribution.		55.00 May Be added to Fees	 	nonae
10.	OFFICERS AND DIF	ECTORS			04/29/08-8	
title Name	PST HART, NATHAN C				• =	
STREET ADDRESS	7611 EHRLICH RD.					
City-S1-ZIP	TAMPA, FL					
TITLE						
STREET ADDRESS						
CITY-ST-ZIP		·				
TITLE NAME						
STREET ADDRESS				DΩ	NOT WR	ITE
CITY-ST-ZIP						
TITLE Name :				IN 7	THIS SPA	CE
STREET ADDRESS						
CITY-ST-ZIP						
TITLE						
NAME Street address						
CITY-ST-ZIP				_		f
TITLE :						
NAME STREET ADDRESS CITY-ST-ZIP		المام ا			* 1K	

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Watt C

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/08 813-920-610x