2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jan 30, 2004 8:00 am Secretary of State DOCUMENT # P96000020722 01-30-2004 90061 028 ***150.00 FULL SPECTRUM TELECOMMUNICATIONS, INC. Principal Place of Business Mailing Address ********* 14088 ICOT BLVD 14088 ICOT BLVD CLEARWATER, FL 33760 CLEARWATER, FL 33760 US US 01162004 Cha-P CR2E034 (10/03) Applied For 4 FEI Number 59-3364584 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOHNSON, DANIEL P Street Address (P.O. Box Number is Not Acceptable) 14088 ICOT BLVD CLEARWATER, FL 33760 8. The above named entity subm the purpose of changing its registered office the obligations of registered SIGNATURE. (NOTE: Reg of registered agent and title if applicable 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution, After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change TITLE ☐ Delete TITLE JOHNSON, DANIEL P JOHNSON, DANIEL P NAME NAME 14175 Icor Blud. suite 100 STREET ADDRESS 14088 ICOT BLVD STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33760 CHTY-ST-ZIP Clearwater, FL Delete Change -Addition REDMOND, JOHN C NAME MARKE suite 100 STREET ADDRESS 7081 GRAND NATIONAL DR STE 106 STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32819 CITY-ST-ZIP Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change . Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this liling does not qualify for the exemption stated in Section 119.07(3)(i), 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 truster exposured 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, which all other like empowered. SIGNATURE:

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