

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000003990

FILED
Apr 29, 2004
Secretary of State

Entity Name: COMPUSOURCE COMMUNICATIONS CORP.

Current Principal Place of Business:

8723 SW 129 STREET
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

8723 SW 129 STREET
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0842125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAVAKOLY, ADAM
8723 SW 129 STREET
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

TAVAKOLY, BEVERLYN
8723 SW 129 STREET
MIAMI, FL 33176 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: BEVERLYN TAVAKOLY

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: TAVAKOLY, AHMAD
Address: 8723 SW 129ST
City-St-Zip: MIAMI, FL 33176

Title: SVD () Delete
Name: TAVAKOLY, GHASSEM
Address: 8723 SW 129ST
City-St-Zip: MIAMI, FL 33176

Title: T () Delete
Name: TAVAKOLY, BEVERLYN
Address: 8723 SW 129ST
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: TAVAKOLY, BEVERLYN
Address: 8723 SW 129ST
City-St-Zip: MIAMI, FL 33176

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BEVERLYN TAVAKOLY

VP

04/29/2004

Electronic Signature of Signing Officer or Director

Date