

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000048295

FILED
May 01, 2004
Secretary of State

Entity Name: CARRIER NETWORK SERVICES, INC.

Current Principal Place of Business:

855 S.W. 78TH AVENUE
PLANTATION, FL 32324

New Principal Place of Business:

3121 W. HALLANDALE BEACH BLVD
SUITE 101
PEMBROKE PARK, FL 33009

Current Mailing Address:

855 S.W. 78TH AVENUE
PLANTATION, FL 32324

New Mailing Address:

3121 W. HALLANDALE BEACH BLVD
SUITE 101
PEMBROKE PARK, FL 33009

FEI Number: 65-0856577

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARDES, MICHAEL
855 SW 78 AVE
PLANTATION, FL 33324

Name and Address of New Registered Agent:

PARDES, MICHAEL
3121 W. HALLANDALE BEACH BLVD
SUITE 101
PEMBROKE PARK, FL 33009

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:

05/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: LIEBOWITZ, TED
Address: 855 SW 78TH AVE
City-St-Zip: PLANTATION, FL 33324

Title: DP () Delete
Name: PARDES, MICHAEL
Address: 855 SW 78TH AVE
City-St-Zip: PLANTATION, FL 33324

Title: DST () Delete
Name: MARKOWITZ, HOWARD
Address: 855 SW 78TH AVE
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: BRAFF, NELSON
Address: 162 E 64 ST
City-St-Zip: NEW YORK, NY 10021

Title: D () Delete
Name: LIEBOWITZ, SARA
Address: 162 E 64 ST
City-St-Zip: NEW YORK, NY 10021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: HOWARD MARKOWITZ

D

05/01/2004

Electronic Signature of Signing Officer or Director

Date