

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000058516 1. Entity Name NETSOURCE COMMUNICATIONS INC	
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Principal Place of Business 10050 16TH ST NORTH SAINT PETERSBURG, FL 33716	Mailing Address 10050 16TH ST NORTH SAINT PETERSBURG, FL 33716
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DO NOT WRITE IN THIS SPACE



04132006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3534697	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**BOYANAPALLI, VENKATA S
10050 16TH ST NORTH
SAINT PETERSBURG, FL 33716**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reappointing)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P VENKATA, BOYANAPALLI S 10050 16TH ST NORTH SAINT PETERSBURG, FL 33716
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05/05/06-80096-006 150.00

12. I hereby 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: 	4/14/06	727-776-1458
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #