



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 165083		2. Name of Corporation Global Capacity Group, Inc.			
3. Street Address Principal Business Office 730 N. Post Oak Road, Suite 400			City Houston	State TX	Zip 77024
4. Business Phone No. 405-775-8177		5. State of Incorporation Texas			
6. Brief Description of the Character of Business Conducted in Rhode Island Telecommunication Reseller					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name George King			Vice President Name Robert Pollman		
Street Address 730 N. Post Oak Road, Suite 400			Street Address 730 N. Post Oak Road, Suite 400		
City Houston	State TX	Zip 77024	City Houston	State TX	Zip 77024
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Houston	TX	77024	Houston	TX	77024
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name David Beamish			Director Name Lee Wiskowski		
Street Address 730 N. Post Oak Road, Suite 400			Street Address 730 N. Post Oak Road, Suite 400		
City Houston	State TX	Zip 77024	City Houston	State TX	Zip 77024
Director Name Phillip Kenny			Director Name		
Street Address 730 N. Post Oak Road, Suite 400			Street Address		
City Houston	State TX	Zip 77024	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES					
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
5,000,000	PWP	\$0.00	0	PWP	\$0.00
25,000,000	CWP	\$0.00	0	CWP	\$0.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

JUN 17 2008

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature: Chris Collier Date: 5/21/08
Print or Type Name: Chris Collier
Regulatory Agent
Title