



Control Number: 25000



Item Number: 2120

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**CONTROL No. 25000**

**ANNUAL REPORTING REQUIREMENTS AND UPDATE REPORTING  
REQUIRMENTS FOR AN INTEREXCHANGE CARRIER, PREPAID  
CALLING CARD COMPANY, AND OTHER UNCERTIFICATED  
NONDOMINANT TELECOMMUNICATIONS CARRIERS**

## Section One: Basic Information

Type of Registration Report:

IXO 11404 IXC Registration Number  
Pre Paid Calling Service Company Registration Number

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2003 OCT 29 AM 9:01  
PUBLIC UTILITY COMMISSION  
FILING CLERK  
CITY OF LA  
60014

1. Name of Registrant on Registration: ULTRA COM, INC  
 Legal/Assumed Name of Registrant: SAME  
 Office Address (Street, City, State, Zip Code): 899 WEDGEWOOD, CRYSTAL LAKE, IL 60014
2. Company Mailing Address (Street/P.O. Box, City, State, Zip Code): SAME
3. Registrant Toll-Free Customer Service Number: 877 308 3282  
 Registrant Company Office Number: 815 444 1054  
 Registrant Company Fax Number: 815 444 1135
4. Registrant Company Website Address: ULTRACOM2.COM  
 Registrant Email Address: DENNIS@AMAUDIT.COM
5. Authorized Representative Contact (Name and Title): DENNIS MARCHEK, PRES  
 Authorized Representative Address: 899 WEDGEWOOD DR, CRYSTAL LAKE, IL 60014  
 Authorized Representative Mailing Address: SAME  
 Authorized Representative Phone Number: 815 455 6770  
 Authorized Representative Fax Number: 815 455 6771  
 Authorized Representative Email Address: DENNIS@AMAUDIT.COM
6. Emergency Contact (Name and Title): DENNIS MARCHEK, PRES  
 Emergency Contact Phone Number: 815 455 6770  
 Emergency Contact Fax Number: 815 455 6771  
 Emergency Contact Cell Phone Number: 708 204 1945  
 Emergency Contact Email Address: DENNIS@AMAUDIT.COM

**Section Two: Affiliate and Key Personnel Information**

7. Has your Form of Business changed over the past 12 months (e.g. corporation, partnership, sole proprietorship)? NO. If Yes, complete the following:  
State where Business is Currently Registered: \_\_\_\_\_  
Certification/Authorization Number: \_\_\_\_\_  
Date Business Change was Registered: \_\_\_\_\_
8. Legal Name of all Affiliated Telecommunications Public Utilities or Affiliated Telecommunications Companies Providing Regulated Services: NONE  
States where Affiliates are Providing Services: \_\_\_\_\_  
If the affiliate is in Texas, provide a description of the relationship to the registrant.  
Provide Organizational Chart (if available).
9. List Directors, Officers, or Partners with their business address, phone number, fax number, email/website address: SEE BELOW
10. List the Five Largest Shareholders (if applicable) with their business address, phone number, and email/website address: SAME AS 9
11. Is Registrant currently providing service in Texas? YES

(9) DENNIS MARCHUK, president, director & shareholder 50%  
899 WEDGEWOOD DR.  
CRYSTAL LAKE, IL 60014  
(815) 455-6770  
FAX (815) 455-6771  
DENNIS @ AMAUDIT.COM

THOMAS JONGERMAN, Secy, TREAS, Director & 50% shareholder  
10435 WOODBINE  
HUNTLEY, IL 60030  
(815) 455-1185  
FAX (815) 444-1135  
TOM @ AMAUDIT.COM

## AFFIDAVIT

STATE OF IL §  
COUNTY OF McHenry §

1. My name is Dennis Marchuk I am  
PRESIDENT of the reporting company  
ULTRA COM, INC

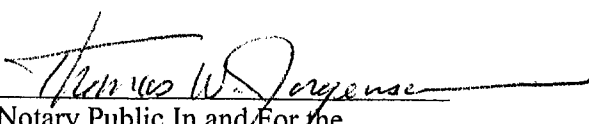
2. I swear or affirm that I have personal knowledge of the facts stated in this report on Non-dominant Carriers, that I am competent to testify to them, and that I have the authority to make this report on behalf of the company. I further swear or affirm that all of the statements and representations made in this report are true and correct. I swear or affirm that the company understands and will continue to comply with all requirements of law applicable to Non-dominant Carriers.

  
Signature

Dennis Marchuk  
Typed or Printed Name

SWORN TO AND SUBSCRIBED before me on the 20th day of Oct, 2003



  
Notary Public In and For the  
State of IL

My commission expires: 5/10/2006