

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000045845

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: DS 1 COMMUNICATIONS, INC.

## Current Principal Place of Business:

3798 WOODFIELD CT.  
COCONUT CREEK, FL 33073

## New Principal Place of Business:

7375 VIA LURIA  
LAKE WORTH, FL 33467

## Current Mailing Address:

3798 WOODFIELD CT.  
COCONUT CREEK, FL 33073

## New Mailing Address:

7375 VIA LURIA  
LAKE WORTH, FL 33467

FEI Number: 65-1105683

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: SPAEDY, DAVID J  
Address: 3798 WOODFIELD CT.  
City-St-Zip: COCONUT CREEK, FL 33073

Title: SECR ( ) Delete  
Name: SPAEDY, ELZA A  
Address: 3798 WOODFIELD CT.  
City-St-Zip: COCONUT CREEK, FL 33073

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: SPAEDY, DAVID J  
Address: 7375 VIA LURIA  
City-St-Zip: LAKE WORTH, FL 33467

Title: SECR (X) Change ( ) Addition  
Name: SPAEDY, ELZA A  
Address: 7375 VIA LURIA  
City-St-Zip: LAKE WORTH, FL 33467

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: DAVID J. SPAEDY

PSTD

04/26/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date