2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State
04-27-2007 90193 036 ***150.00

DOCUMENT # P02000119417

1. Entity Name
ENLIGHT COMMUNICATIONS INC.

Principal Place of Business	Mailing Address
2541 S. UNIVERSITY DRIVE DAVIE, FL 33324 US	2541 S. UNIVERSITY DRIVE DAVIE, FL 33324 US

04232007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
10111 N.W. 53rd Street	10111 N.W. 53rd Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SUNRISE, FL	City & State: SUNRISE, FL
Zip: 33351 Country: USA	Zip: 33351 Country: USA

4. FEI Number: 30-0128026 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RABIN, PAMELA 157 NW 77TH AVE. MARGATE, FL 33063	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RABIN, ALAN 2541 S. UNIVERSITY DRIVE DAVIE, FL 33324	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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: ala — 4-23-07 — 954 472-0300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #