2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000123500

Entity Name: ZICOM INC.

FILED May 12, 2006 Secretary of State

Current P	Principal Place of E	Business:	New Principal Place	of Business:
	CON AVENUE RINGS, FL 33166	US		
Current M	lailing Address:		New Mailing Addres	ss:
	CON AVENUE RINGS, FL 33166	US		
FEI Number	: 04-3825761 FE	Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	d Address of Curre	nt Registered Agent:	Name and Address	of New Registered Agent:
1200 FALO MIAMI SPI	DANIEL D CON AVENUE RINGS, FL 33166	US	purpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	nto tino otatement for the	purpose of changing its registere	or registered agent, or both,
SIGNATU				
SIGNATU		gnature of Registered Ag	ent	Date
n accordan	Electronic Since with s. 607.193(2)(b), F.S., the corporation did n		Date
In accordan Election Ca	Electronic Since with s. 607.193(2)(b	e), F.S., the corporation did not strain the contribution ().	ot receive the prior notice.	Date ES TO OFFICERS AND DIRECTOR
In accordan Election Ca OFFICER Title: Name: Address:	Electronic Since with s. 607.193(2)(b Compaign Financing True	o), F.S., the corporation did n st Fund Contribution (). S: te	ot receive the prior notice.	
In accordan Election Cal OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic Since with s. 607.193(2)(b mpaign Financing Trus S AND DIRECTOR P () Delet CANARY, DANIEL D 1200 FALCON AVEN	o), F.S., the corporation did not Fund Contribution (). S: te UE 33166 US te M	ot receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	ES TO OFFICERS AND DIRECTOR
In accordan Election Ca	Electronic Since with s. 607.193(2)(bmpaign Financing Trus S AND DIRECTOR P () Deleter CANARY, DANIEL DO 1200 FALCON AVEN MIAMI SPRINGS, FL VP () Deleter SHELOW, PAMELA NO 1200 FALCON AVEN	o), F.S., the corporation did not Fund Contribution (). S: te UE 33166 US te M UE 33166 US	ot receive the prior notice. ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTOR: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: PAMELA M SHELOW VP 05/12/2006