2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000067921

1. Entity Name INCLINE COMMUNICATIONS, INC.



FILED Apr 24, 2007 08:00 AM Secretary of State

Principal Place of Business

715 US HWY 92 W SEFFNER, FL 33584-3513 US Mailing Address

715 US HWY 92 W SEFFNER, FL 33584-3513 US



DO NOT WRITE IN THIS SPACE

 04122007
 No Chg-P
 CF2E034 (11/05)

 4. FEI Number
 Applied For S9-3315186

 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TOY, RONALD W 715 US HWY 92 W SEFFNER, FL 33584-3513

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| SEPT NER, 1 E 33304-3313 | | | IN THIS SPACE | |
|--|---|----------------------------------|--|---|
| 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 | | | Agent signature required when reinstating) | DATE |
| FILE NOWI! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution | | cing \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIREC | CTORS | | |
| TITLE NAME STREET ADDRESS CITY- ST-ZIP | P TOY, RONALD W 715 US HWY 92 WEST SEFFNER, FL 335843513 | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP TOY, MARTHA 715 US HWY 92 WEST SEFFNER, FL 335843513 | | | 000000728543 05/08/07-80001-007 158.75 |
| TITLE NAME STREET ADDRESS CITY+ST-ZIP | | | DO | NOT WRITE |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | · |
| 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. | | | | |