

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000100444

**FILED
Jul 19, 2006
Secretary of State**

Entity Name: ALLIANCE COMMUNICATIONS, INC.

Current Principal Place of Business:

15310 AMBERLY DR.
SUITE 215
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

15310 AMBERLY DR.
SUITE 215
TAMPA, FL 33647

New Mailing Address:

FEI Number: 59-3417731 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LUONGO, JANICE A P
5035 WESLEY DRIVE
TAMPA, FL 33647 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LUONGO, JANICE A
Address: 5035 WESLEY DRIVE
City-St-Zip: TAMPA, FL 33647

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V () Change (X) Addition
Name: LUONGO, SALVATORE
Address: 5035 WESLEY DRIVE
City-St-Zip: TAMPA, FL 33647

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: ANJANETTE MITCHELL

S

07/19/2006

Electronic Signature of Signing Officer or Director

_____ Date