2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 639708

FILED Jan 13, 2009 Secretary of State

Entity Name: ANNOUNCEMENT CONVERTERS, INC.

Current Principal Place of Business:			New Principal Place of Business:	
3165 NW PA LOCI	/ 45 AVE KA, FL 33054			
urrent M	lailing Addres	s:	New Mailing Addres	s:
3165 NW PA LOCI	/ 45 AVE KA, FL 33054	US		
El Number	: 59-1944660	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
DIXON, SH				
50 W FLA	EUM TOWER AGLER ST 33130 US			
50 W FLA IIAMI, FL The above	AGLER ST 33130 US	ubmits this statement for the	ourpose of changing its registere	ed office or registered agent, or both,
50 W FLA IIAMI, FL The above	AGLER ST 33130 US named entity s e of Florida. RE:			ed office or registered agent, or both,
50 W FLA IIAMI, FL he above n the State	AGLER ST 33130 US named entity s e of Florida. RE:	ubmits this statement for the liberal statem		ed office or registered agent, or both, Date
50 W FLAMI, FL The above In the State	AGLER ST 33130 US named entity s e of Florida. RE: Electroni			
50 W FLAMIAMI, FLOWING THE STATE STA	AGLER ST 33130 US named entity s e of Florida. RE: Electroni	ic Signature of Registered Ag	ent	
50 W FLAMIAMI, FLOWING THE STATE STA	AGLER ST 33130 US named entity selectronic mpaign Financing S AND DIRECT	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete TON A.,	ent	Date
50 W FLAMIAMI, FL The above the State SIGNATUI SIECTION Can DFFICERS title: lame: ddress:	AGLER ST 33130 US named entity see of Florida. RE: Electroni mpaign Financing S AND DIRECT PD () GREENE, STAN 13165 NW 45 A' OPA LOCKA, FL AS () DIXON,SHARON	ic Signature of Registered Ag Trust Fund Contribution (). FORS: Delete TON A., VE . 33054 Delete I, TOWER 150 W FLAGLER ST	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify 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: STANTON GREENE PD 01/13/2009