## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000000413

Entity Name: ONFIBER COMMUNICATIONS, INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business:				New Princ	New Principal Place of Business:		
11921 N. M AUSTIN, TX	OPAC,SUITE ( 78759 U						
Current Mailing Address:				New Maili	New Mailing Address:		
SUITE 350	RACUSE WA AL, CO 8011						
FEI Number:	77-0528655	FEI Number Appli	ed For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registere	d Agent:	Name and	Address o	of New Registered Agent:	
1200 SOUT	DRATION SYS H PINE ISLAI DN, FL 33324	ND ROAD					
The above r		submits this stater	nent for the pu	rpose of changing i	ts registere	d office or registered agent, or both,	
SIGNATUR							
	Electron	ic Signature of Re	egistered Agen	t		Date	
Election Cam	paign Financing	Trust Fund Contrib	ution ( ).				
OFFICERS	AND DIREC	TORS:		ADDITION	S/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DPCE () Delete BOTTOMS, DANNY 21587 E. BRIARWOOD DR. AURORA, CO 80016 US		Title: Name: Address: City-St-Zip:	() Change () Addition			
Title: Name: Address: City-St-Zip:	D () HEARST, WILL 2750 SAND HIL MENTO PARK,	L ROAD		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	COO () GUESS, MICHA 8101 CRABTRE AUSTIN, TX 78	E COVE		Title: Name: Address: City-St-Zip:	COO GUESS, MIO 11921 N. M AUSTIN, TX	OPAC EXPRESSWAY, SUITE 100	
Title: Name: Address: City-St-Zip:	D () BUGAS, ANDY 58 PARK AVE BRONXVILLE, 1	Delete NY 10708 US		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete LONG, MIKE 30700 RUSSELL RANCH RD WESTLAKE VILLAGE, CA 91362		Title: Name: Address: City-St-Zip:	() Change () Addition			
Title: Name: Address: City-St-Zip:	RUFFIN, EDMÚ	M DRIVE,STE. 580		Title: Name: Address: City-St-Zip:	3050 K STR	(X) Change ( ) Addition R, CHRISTOPHER REET, N.W. ON, DC 20007 US	

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: LYNNE PLATT ATTY 04/27/2006