2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006882

Entity Name: WHALE COMMUNICATIONS, INC.

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business: 400 KELBY STREET, 15TH FLOOR			New Principal Place of Business:	
ORT LEE	E, NJ 07024			
Current Mailing Address:			New Mailing Addre	ess:
	Y STREET, 15 E, NJ 07024	TH FLOOR		
El Number	: 51-0391887	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
201 HAY	ATION SERVIC S STREET SSEE, FL 323			
	e named entity : e of Florida.	submits this statement for the	ourpose of changing its register	red office or registered agent, or both,
IGNATU				
	Electror	ic Signature of Registered Ag	ent	Date
lection Ca	mpaign Financin	g Trust Fund Contribution ().		
FFICER	S AND DIREC	TORS:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTOR
itle: lame: .ddress: city-St-Zip:	BARKAT, ELI 11 HAMENOFI	Delete // STREET JACH 46725 ISREA,	Title: Name: Address: City-St-Zip:	() Change () Addition
itle: ame: ddress: ity-St-Zip:	PILC, ROGERT	REET, 15TH FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition
itle: lame: ddress: ity-St-Zip:	D () MOSZKOWSKI 430 PARK AVE NEW YORK, N	, 6TH FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition
itle: ame: ddress: ity-St-Zip:	PT () STEINER, DAN 21 HAMELACH ROSH HAAIM I	A STREET	Title: Name: Address: City-St-Zip:	() Change () Addition
itle:	, ,	Delete	Title: Name:	() Change () Addition
ame: ddress: ity-St-Zip:	MAHER, DAN 400 KELBY ST FORT LEE, NJ	REET, 15TH FLOOR 07024	Address: City-St-Zip:	

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: GALIT BARON CONT 04/24/2006