

2007 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVAL
AND
FILED

07 APR 24 AM 11:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1032



04112007 Chg-P CR2E034 (12/06)

DOCUMENT # F05000006882			
1. Entity Name WHALE COMMUNICATIONS, INC.			
Principal Place of Business 400 KELBY STREET, 15TH FLOOR FORT LEE, NJ 07024		Mailing Address 400 KELBY STREET, 15TH FLOOR FORT LEE, NJ 07024	
2. Principal Place of Business - No P.O. Box # One Microsoft Way Suite, Apt. #, etc.		3. Mailing Address One Microsoft Way Suite, Apt. #, etc.	
City & State Redmond, WA Zip 98052-6399 Country USA		City & State Redmond, WA Zip 98052-6399 Country USA	
4. FEI Number 51-0391887		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C BARKAT, ELI 11 HAMENOFIM STREET HERZELIA DITUACH 46725 ISREA, <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P, Treas Keith R. Doliver One Microsoft Way Redmond, WA 98052-6399 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PILC, ROBERT 400 KELBY STREET, 15TH FLOOR FORT LEE, NJ 07024 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, VP, Sec Benjamin O. O'Donoff One Microsoft Way Redmond, WA 98052-6399 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOSZKOWSKI, NEAL 430 PARK AVE, 6TH FLOOR NEW YORK, NY 10022 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT STEINER, DANIEL 21 HAMELACHA STREET ROSH HAAIM ISRAEL 48091, <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	300098224763 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MAHER, DAN 400 KELBY STREET, 15TH FLOOR FORT LEE, NJ 07024 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BAKER, DALE 400 KELBY STREET, 15TH FLOOR FORT LEE, NJ 07024 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.			
SIGNATURE: 		Ben O'Donoff, V.P. 4-12-07 425-806-8080	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	



CORPORATION SERVICE COMPANY

292

ACCOUNT NO. : 072100000032

REFERENCE : 864447 4726922

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 150.00

ORDER DATE : April 23, 2007

ORDER TIME : 10:12 AM

ORDER NO. : 864447-015

CUSTOMER NO: 4726922

ANNUAL REPORT FILING

NAME: WHALE COMMUNICATIONS, INC.

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2007 APR 24 AM 10:57
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Roath-EXT#2955

EXAMINER'S INITIALS: _____

RSC
4/24/07