


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # F06000006437	
1. Entity Name BROADBAND SOLUTION COMMUNICATION INC.	

Principal Place of Business 615 S DUPONT HWY DOVER, DE 19901	Mailing Address 615 S DUPONT HWY DOVER, DE 19901
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01302007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 83-0446766	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  REGNUM GROUP, INC. 7999 NW 53 ST MIAMI, FL 33166
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

U00000611963  
02/02/07-80089-002 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SAVINON, FRANK 615 S DUPONT HWY DOVER, DE 19901
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ALVAREZ, SALVATORE 615 S DUPONT HWY DOVER, DE 19901
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT ALVAREZ, NUR L 615 S DUPONT HWY DOVER, DE 19901
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

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: Nur L. Alvarez 1-30-07 703-5984460  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #