## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 05, 2007 08:00 Al Secretary of State DOCUMENT # F51262 1. Entity Name PLUS COMMUNICATIONS, INC. Principal Place of Business Mailing Address 600 RINEHART RD. 600 RINEHART RD. LAKE MARY, FL 32746 LAKE MARY, FL 32746 No Chg-P CR2E034 (11/05) 03262007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2184864 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BEIK, STEVE 1101 N LAKE DESTINY DRIVE SUITE 130 IN THIS SPACE MAITLAND, FL 32751 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. STD TITLE STRANG, JOY F NAME ~"U00000692315" 2231 PEACHLEAF CT STREET ADDRESS LONGWOOD, FL 32779 04/13/07-80045-024-150.00 CITY-ST-ZIP TITLE STRANG, STEPHEN NAME STREET ADDRESS 2231 PEACHLEAF CT CITY-ST-ZIP LONGWOOD, FL 32779 DO NOT WRITE TITLE NAME STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby 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:

NAME STREET ADDRESS CITY-ST-ZIP

TURE MYS TYPED OR PRINTED NAME OF SIGNING OF

3/29/07

407-333-0600

Daytime Phone #

**FILED**