

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2004.08:00 AM
Secretary of State

DOCUMENT # F99000006620

1. Entity Name
FOCUS COMMUNICATIONS, INC.



Principal Place of Business

526 W. BLUERIDGE AVE.
ORANGE, CA 92865

Mailing Address

526 W. BLUERIDGE AVE.
ORANGE, CA 92865

DO NOT WRITE IN THIS SPACE



04022004 No Chg-P CR2E034 (10/03)

4. FEI Number
33-0520167

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DCEO
GIBBONS, CHRISTOPHER J
526 W. BLUERIDGE AVE.
ORANGE, CA 92865

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DPS
LYNCH, TIMOTHY H
526 W. BLUERIDGE AVE.
ORANGE, CA 92865

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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04/08/04-80013-017 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/04 (714) 998-2121
Date Daytime Phone #