


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 09, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # G19330**

1. Entity Name  
**ASTERISK COMMUNICATIONS, INC.**



Principal Place of Business  
**2848 E OAKLAND PARK BLVD**  
**FT. LAUDERDALE, FL 33306 US**

Mailing Address  
**P O BOX 11047**  
**FT. LAUDERDALE, FL 33339-047 US**



01052005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2256345**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**INGHAM, FREDERICK**  
**2848 NE 25TH STREET**  
**FT. LAUDERDALE, FL 33305**

**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 \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and D.C. # if applicable. (NOTE: Registered Agent signature required when re-issuing)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

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

U00000295089  
 04/09/05-80013-025 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD INGHAM, FREDERICK 2848 E OAKLAND PARK BLVD FT LAUDERDALE, FL 33306
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD INGHAM, RICHARD S. 2848 E OAKLAND PARK BLVD FT. LAUDERDALE, FL 33306
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VDT INGHAM, JR., RICHARD S. 2848 E OAKLAND PARK BLVD FT. LAUDERDALE, FL 33306
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD INGHAM, TIMOTHY C 2848 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE 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: RFH up

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Entity Phone # \_\_\_\_\_