


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # L95000000814
1. Entity Name
ATCOM COMMUNICATIONS, L.C.



Principal Place of Business 551 BAY POINT ROAD MIAMI, FL 33137	Mailing Address 551 BAY POINT ROAD MIAMI, FL 33137
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DO NOT WRITE IN THIS SPACE



04292004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0624210	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ATLAS, RUSSELL D
551 BAY POINT ROAD
MIAMI, FL 33137

**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 _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEM ATLAS, RUSSELL D 551 BAY POINT ROAD MIAMI, FL 33137
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ATLAS, RUSSELL D 551 BAY POINT ROAD MIAMI, FL 33137
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05/03/04-80035-023 50.00

**DO NOT WRITE
IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Russell Atlas Russell Atlas 4/15/04 305.572.0030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #