


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2006 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



01062006No Chg-LLC CR2E083 (11/05)

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

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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, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE MEM	ATLAS, RUSSELL D 551 BAY POINT ROAD MIAMI, FL 33137
TITLE MGR	ATLAS, RUSSELL D 551 BAY POINT ROAD MIAMI, FL 33137
TITLE NAME	
TITLE NAME	
TITLE NAME	
TITLE NAME	

1100000382480
 01/12/06-80014-002 50.00

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11. 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 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 D Atlas* 1/12/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE _____ Date _____ Daytime Phone # _____