


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 29, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # M28885		
1. Entity Name EXCEL COMMUNICATIONS, INC.		
Principal Place of Business 6411 S.W. 25TH STREET MIRAMAR, FL 33023	Mailing Address 6411 S.W. 25TH STREET MIRAMAR, FL 33023	
<b>DO NOT WRITE IN THIS SPACE</b>		



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2786980	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROGERS, COLLEEN M.  
 6411 S.W. 25TH STREET  
 MIRAMAR, FL 33023

**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 \_\_\_\_\_

**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

U00000097953  
 03/29/04-80021-014 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROGERS, BAIRD E. 6411 S.W. 25TH ST. MIRAMAR, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST ROGERS, COLLEEN M. 6411 S.W. 25TH ST. MIRAMAR, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROGERS, COLLEEN M. 6411 S.W. 25TH ST. MIRAMAR, FL
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Colleen Rogers 3/24/04 1-954-987-7178  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #