2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N94000003470

Entity Name: CALL COMMUNICATIONS GROUP, INC.

Current Principal Place of Business:

10700 CARIBBEAN BLVD
202-D
MIAMI, FL 33189 US

New Principal Place of Business:

Current Mailing Address:

10700 CARIBBEAN BLVD
202-D
MIAMI, FL 33189 US

New Mailing Address:

FEI Number: 65-0517726 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBBINS, ROBERT J
10700 CARIBBEAN BLVD STE 202-D
MIAMI, FL 33189 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	ROBBINS, ROBERT J	
Address:	10700 CARIBBEAN BLVD 202-D	
City-St-Zip:	MIAMI, FL 33189	
Title:	VD	( ) Delete
Name:	REYES, JUAN F	
Address:	6614 SW 128TH CT	
City-St-Zip:	MIAMI, FL 33183	
Title:	TD	( ) Delete
Name:	HOFFMAN, SCOTT A	
Address:	14693 64TH COURT NORTH	
City-St-Zip:	LOXAHATCHEE, FL 33470	
Title:	D	( ) Delete
Name:	GOLOB, MARTIN D	
Address:	10700 CARIBBEAN BLVD 202-D	
City-St-Zip:	MIAMI, FL 33189	
Title:	D	( ) Delete
Name:	PAPPAS, TIMOTHY	
Address:	2121 SW 3RD AVE	
City-St-Zip:	MIAMI, FL 33129	
Title:	D	( ) Delete
Name:	RUMP, RICHARD	
Address:	8400 SW 174 ST	
City-St-Zip:	MIAMI, FL 33157	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J. ROBBINS PRES 04/30/2007

Electronic Signature of Signing Officer or Director — Date