## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000112399

Entity Name: CATCH 9 COMMUNICATIONS, INC.

**FILED** Mar 01, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

4300 WEST CYPRESS STREET 1905 SOUTH HOLLY LANE

SUITE 900 TAMPA, FL 33629

TAMPA, FL 33607

**Current Mailing Address: New Mailing Address:** 

4300 WEST CYPRESS STREET 64 RITZ COVE DRIVE

SUITE 900 MONARCH BEACH, CA 92629

TAMPA, FL 33607

FEI Number: 59-3705332 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SALAS, RICARDO A SALAS, RICARDO A 4300 WEST CYPRESS STREET 1905 SOUTH HOLLY LANE

TAMPA, FL 33629 SUITE 900 TAMPA, FL 33607 US

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: RICARDO A. SALAS 03/01/2006

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

Name: KANG, JOHN Name: KANG, JOHN 25800 COMMERCENTRE DRIVE 4300 WEST CYPRESS STREET, SUITE 900 Address: Address:

LAKE FOREST, CA 92630 City-St-Zip: TAMPA, FL 33607 City-St-Zip:

Title: Title: DST () Delete DST (X) Change ( ) Addition

SALAS, RICARDO Name: SALAS, RICARDO Name: 4300 WEST CYPRESS STREET, SUITE 900 64 RITZ COVE DRIVE Address: Address: TAMPA, FL 33607 MONARCH BEACH, CA 92629

Title: Title: CFO (X) Delete () Change () Addition

HUTCHINSON, CHARLES Name: Name:

4300 WEST CYPRESS STREET, SUITE 900 Address: Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip:

Title: CEO (X) Delete Title: () Change () Addition

BEHUNIAK, DAN Name: Name: 4300 WEST CYPRESS STREET, SUITE 900 Address: Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICARDO A. SALAS DST 03/01/2006