


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 OCT 17 AM 10:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| | |
|---|---|
| DOCUMENT # P000001163783 |  |
| 1. Entity Name O.F.P. Communications, Inc. | |

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03
DO NOT WRITE IN THIS SPACE

| | |
|---|---|
| 2. Principal Place of Business 667 Nighthawk Circle Suite, Apt. #, etc. | 3. Mailing Address 667 Nighthawk Circle Suite, Apt. #, etc. |
| City & State Winter Springs, FL Zip 32708- Country USA | City & State Winter Springs, FL Zip 32708- Country USA |

| | |
|---|--|
| 4. FEI Number 59-3686022 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

DO NOT WRITE IN THIS SPACE

| | |
|--|-------------------|
| 7. Name and Address of Current Registered Agent | |
| Name John Earl Graham | |
| Street Address (P.O. Box Number is Not Acceptable) 667 Nighthawk Circle | |
| City Winter Springs | FL Zip Code 32708 |

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 *John Earl Graham* DATE *Oct 13/03*
(NOTE: Registered Agent signature required when reinstating)

| | |
|---|---|
| January 1 - May 1, Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|

| 10. OFFICERS AND DIRECTORS | | | |
|--|---|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D P VP S T - John Earl Graham 667 Nighthawk Circle Winter Springs, FL 32708 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 800023867488 10/17/03--01004--018 **150.00 |
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *John Earl Graham* DATE *Oct 13/03* 407 468-5957
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)

O.F.P. Communications, Inc.
667 Nighthawk Circle
Winter Springs, FL 32708
407-468-5957

October 10, 2003

Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

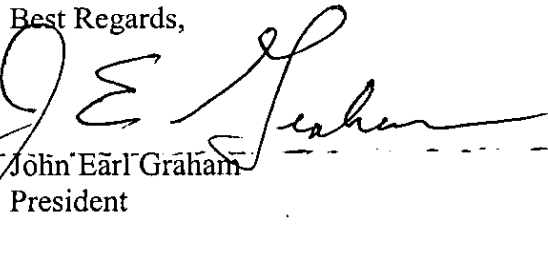
Subject: O.F.P. Communications, Inc.
P00000116378

To Whom It May Concern:

We recently realized that we had not received our Uniform Business Report from the state and have not paid our \$150.00 filing fee due on May 1st of every year. We always have problems receiving the mail at my home address when our street name is spelled wrong. You have Nighthawk with a "K". I never get mail spelled this way.

We apologize for any inconvenience this may have caused but please except the attached Uniform Business Report for the year 2003.

Best Regards,



John Earl Graham
President