2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Secretary of State DOCUMENT # P01000010120 07-28-2006 90030 025 ***150.00 1. Entity Name SNAPY COMMUNICATIONS INC. Principal Place of Business Mailing Address 40101076 1500 UNIVERSITY DRIVE, STE 117 1500 UNIVERSITY DRIVE, STE 117 CORAL SPRINGS, FL 33071 CORAL SPRINGS, FL 33071 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07172006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 65-1076203 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AVALON, RJ Street Address (P.O. Box Number is Not Acceptable) .1500 UNIVERSITY DRIVE SUITE 117 CORAL SPRINGS, FL 33071 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the П Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Change ☐ Addition BLASKOFF, KATIN NAME NAME STREET ADDRESS 1500 UNIVERSITY DRIVE, STE 117 STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 CITY-ST-ZIP VP TITLE ☐ Delete TITLE ☐ Change ■ Addition BLASKOV, NIKOLAY NAME NAME STREET ADDRESS 1500 UNIVERSITY DRIVE, STE 117 STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME AVALON, RJ NAME STREET ADDRESS 1500 UNIVERSITY DRIVE, STE 117 STREET ADDRESS CORAL SPRINGS, FL 33071 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the regerver of 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

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jul 28, 2006 8:00 am

Daytime Phone #

ATTACHMENT 40101076

July 10th 2006

Florida Department of State Division of Corporations P.O.Box 6198 Tallahassee, FL 32314-6198

Snappy Communications Inc 1500 University Drive, Ste 117 Coral Springs, FL 33071-6071 Document# 101000010120 Federal ID # 65-1076203

Please be advised I never received the original application for my annual report.

If I had received it by mail I would have paid my fee timely.

At this time please accept my enclosed check for \$150.00

Thank you,

Snappy Communications Inc