

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 22, 2006 8:00 am
Secretary of State

08-22-2006 90029 018 ***150.00

DOCUMENT # P01000119017 1. Entity Name AIMS COMMUNICATIONS, INC.					
Principal Place of Business 10097 CLEARY BLVD SUITE # 202 PLANTATION, FL 33324			Mailing Address 10097 CLEARY BLVD SUITE # 202 PLANTATION, FL 33324		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
VERVASE, INC. 7797 N. UNIVERSITY DRIVE SUITE 208 TAMARAC, FL 33321				Name Carmen Ramos Street Address (P.O. Box Number, Not Acceptable) 10911 NE 2nd Ave #3 City MIAMI State FL Zip Code 33141	
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 <u><i>Carmen Ramos</i></u> DATE <u>8-14-06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)</small>					
FILE NOW!!! - FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD MALDONADO, GEORGE <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MALDONADO, GEORGE		NAME		
STREET ADDRESS	10642 NW 1 COURT		STREET ADDRESS		
CITY-ST-ZIP	PLANTATION, FL 33324		CITY-ST-ZIP		
TITLE	ST MALDONADO, IRMA <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MALDONADO, IRMA		NAME		
STREET ADDRESS	10642 NW 1 COURT		STREET ADDRESS		
CITY-ST-ZIP	PLANTATION, FL 33324		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing 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 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, withdrawal or other like empowered.					
SIGNATURE: <u><i>Irma Maldonado</i></u>			Date <u>8/14/06</u> Daytime Phone # <u>9549157221</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

ATTACHMENT



"The Total Solution For All your Business Communication Needs"

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August 17, 2006

AIMS Communications, Inc
10097 Cleary Blvd.
Suite # 202
Plantation, FL 33324

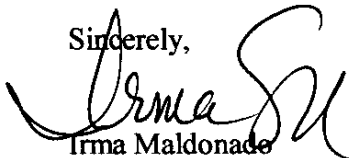
FEIN: 26-0041706

To Whom It May Concern:

Please be advised that we never received the 2006 Profit Corporation Annual Report I recently downloaded the form from the website once I receive a post card from you department. May you please waive the \$400.00 penalty fee? I would like to know if we would no longer receive the application in the mail.

Should you have any questions or need further information please feel free to contact Irma Maldonado at 954-915-7221.

Sincerely,


Irma Maldonado
Secretary / Treasurer