


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000002119	
1. Entity Name AMERICAN COMMUNICATION SOLUTIONS INC.	

Principal Place of Business 1122 ROYALTON RD. ORLANDO, FL 32825	Mailing Address 1122 ROYALTON RD. ORLANDO, FL 32825
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FILED  
08 JAN 18 PM 1:59  
CLERK OF STATE  
TALLAHASSEE, FLORIDA



01162008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 26-0022949	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  PORFIRIO, CASTILLO 1122 ROYALTON RD ORLANDO, FL 32825
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>
DATE _____

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. CASTILLO, PORFIRIO A 1122 ROYALTON RD. ORLANDO, FL 32825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CASTILLO, RICARDO J 7353 FIELDCREST AVENUE WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CASTILLO, NUBIA 2925 WEST 80 STREET #211 HIALEAH, FL 33018
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>M/23</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

04-27-07 01002 029 \$ 1350- \$ 150
<b>DO NOT WRITE IN THIS SPACE</b>

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, with all other like empowered.	
SIGNATURE: <i>P. Castillo</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	01/16/08 407-3412906 Date Daytime Phone #

