2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117694

City-St-Zip:

Entity Name: MASS COMMUNICATIONS INC.

FILED Sep 15, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
650 WES	T AVE			
704 MIAMI BE	ACH, FL 3313	9		
Current Mailing Address:		New Mailing Address:		
650 WES 704	T AVE			
	ACH, FL 3313	9		
FEI Numbei	r: 32-0042481	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:
LAMOTHI 13520 SW MIAMI, FL	ER, EVELYNE V 89 STREET L 33176 US			
	e named entity : te of Florida.	submits this statement for the	ourpose of changing its registered	d office or registered agent, or both,
SIGNATU	IRF.			
		nic Signature of Registered Ag	ent	Date
	Electror	nic Signature of Registered Ag 3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().		Date
Election Ca	Electror	3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ot receive the prior notice.	Date ES TO OFFICERS AND DIRECTOR
Election Ca OFFICER Title: Name: Address:	Electron nce with s. 607.19 ampaign Financine RS AND DIREC PD () LAMOTHER, EN 13520 SW 89 8	3(2)(b), F.S., the corporation did n g Trust Fund Contribution (). TORS: Delete //ELYNE	ot receive the prior notice.	
Election Ca OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron Ince with s. 607.19 Impaign Financing I	3(2)(b), F.S., the corporation did n g Trust Fund Contribution (). TORS: Delete //ELYNE STREET 76 Delete R	ot receive the prior notice. ADDITIONS/CHANGE Title: Name: Address:	ES TO OFFICERS AND DIRECTOR
Election Ca	Electron Ince with s. 607.19 Impaign Financing INCOMPAND DIREC PD () LAMOTHER, EN 13520 SW 89 S MIAMI, FL 331 VP () GARCIA, AMBE 650 WEST AVE MIAMI BEACH, CA () GRAHAM, JOE 650 WEST AVE	3(2)(b), F.S., the corporation did n g Trust Fund Contribution (). TORS: Delete VELYNE STREET 76 Delete ER FL 33139 Delete	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTOR () Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip: MIAMI BEACH, FL 33139

SIGNATURE: RASHID PATEL VP 09/15/2009