

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90375 038 ***150.00

DOCUMENT # P05000003845 1. Entity Name AMERICAN CAP COMMUNICATIONS, INC.																											
Principal Place of Business 1451 PALMETTO DRIVE KISSIMMEE, FL 34744		Mailing Address 1451 PALMETTO DRIVE KISSIMMEE, FL 34744																									
2. Principal Place of Business 550 BITTERWOOD CT Suite, Apt. #, etc.		3. Mailing Address 550 BITTERWOOD CT Suite, Apt. #, etc.																									
City & State KISSIMMEE, FL Zip 34743 Country		City & State KISSIMMEE, FL Zip 34743 Country																									
4. FEI Number 20-2699205		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent MALSINGH, TULSIE 1451 PALMETTO DRIVE KISSIMMEE, FL 34744		7. Name and Address of New Registered Agent Name TULSIE MALSINGH Street Address (P.O. Box Number is Not Acceptable) 550 BITTERWOOD CT City KISSIMMEE FL Zip Code 34743																									
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>Tulsie Malsingh</i></u> DATE <u>2/16/06</u> <small>Signature typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent signature required when reappointing)</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees																									
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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: <u><i>Tulsie Malsingh</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>2/16/06</u> Daytime Phone #																									