

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000077771

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: PERSONAL COMMUNICATION CENTER FLORIDA, INC.

## Current Principal Place of Business:

3800 TAMPA RD.  
110  
OLDSMAR, FL 34677

## New Principal Place of Business:

## Current Mailing Address:

3800 TAMPA RD.  
110  
OLDSMAR, FL 34677

## New Mailing Address:

FEI Number: 20-2924334      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

OBERAJ, DEEPESH  
3800 TAMPA RD.  
110  
OLDSMAR, FL 34677 US

## Name and Address of New Registered Agent:

PUNWANI, AMEET A CPA  
2240 TWELVE OAKS WAY  
102  
WESLEY CHAPEL, FL 33544 US

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.

SIGNATURE: AMEET A. PUNWANI

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: OBERAJ, DEEPESH  
Address: 3800 TAMPA RD.  
City-St-Zip: OLDSMAR, FL 34677

Title: D ( ) Delete  
Name: CHHABRA, SACHIN  
Address: 3800 TAMPA RD.  
City-St-Zip: OLDSMAR, VA 34677

Title: D ( ) Delete  
Name: VINEET, GUPTA  
Address: 3800 TAMPA RD.  
City-St-Zip: OLDSMAR, FL 34677

Title: D ( ) Delete  
Name: GOMEZ, SETH  
Address: 3800 TAMPA RD.  
City-St-Zip: OLDSMAR, FL 34677

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: CHHABRA, SACHIN  
Address: 3800 TAMPA RD.  
City-St-Zip: OLDSMAR, FL 34677

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: VINEET GUPTA

D

04/23/2009

Electronic Signature of Signing Officer or Director

Date