2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000101323

Entity Name: ONCHANNEL COMMUNICATIONS, CORP.

FILED Mar 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4746 N.W. 107TH AVE 6520 NW 114 AVENUE SUITE 1011 SUITE 1622

DORAL, FL 331784244 DORAL, FL 33178

Current Mailing Address: New Mailing Address:

4746 N.W. 107TH AVE 6520 NW 114 AVENUE SUITE 1011 SUITE 1622 DORAL, FL 331784244 DORAL, FL 33178

FEI Number: 20-5315203 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GARCIA, SALOMON
4746 N.W. 107TH AVE
DORAL, FL 33178 US
GARCIA, SALOMON
6520 NW 114 AVENUE
SUITE 1622
DORAL FL 23178 US

DORAL, FL 33178 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: SALOMON GARCIA 03/21/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: GARCIA, SALOMON Name: GARCIA, SALOMON Address: 4746 N.W. 107TH AVE Address: 6520 NW 114 AVENUE, SUITE 1622

City-St-Zip: DORAL, FL 33178 City-St-Zip: DORAL, FL 33178

 Title:
 DST () Delete
 Title:
 DST (X) Change () Addition

 Name:
 GARCIA, MAURICIO
 Name:
 GARCIA, MAURICIO

 Address:
 4746 N.W. 107TH AVE
 Address:
 6520 NW 114 AVENUE, SUITE 1622

City-St-Zip: DORAL, FL 33178 City-St-Zip: DORAL, FL 33178

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: SALOMON GARCIA P 03/21/2008