

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000000382

FILED  
Jan 08, 2010  
Secretary of State

Entity Name: FLX COMMUNICATIONS, INC.

## Current Principal Place of Business:

5825 SUNSET DRIVE, SUITE 207  
SOUTH MIAMI, FL 33143 US

## New Principal Place of Business:

534 MENENDEZ AVENUE  
CORAL GABLES, FL 33143 US

## Current Mailing Address:

534 MENENDEZ AVENUE  
CORAL GABLES, FL 33146 US

## New Mailing Address:

FEI Number: 65-0368185      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FARAGO, ALAN  
534 MENENDEZ AVE.  
CORAL GABLES, FL 33146 US

## Name and Address of New Registered Agent:

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO  
Name: FARAGO, ALAN D CEO  
Address: 534 MENENDEZ AVE.  
City-St-Zip: CORAL GABLES, FL 33146

Title: VP  
Name: VERSACI, LISA A VP  
Address: 534 MENENDEZ AVENUE  
City-St-Zip: CORAL GABLES, FL 33146

Title: NA  
Name: NA, NA A NA  
Address: NA  
City-St-Zip: NA, NA NA

Title: NA  
Name: NA, NA A NA  
Address: NA  
City-St-Zip: NA, NA NA

Title: NA  
Name: NA, NA A NA  
Address: NA  
City-St-Zip: NA, NA NA

Title: NA  
Name: NA, NA A NA  
Address: NA  
City-St-Zip: NA, NA NA

I hereby 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 all other like empowered.

SIGNATURE: ALAN FARAGO

CEO

01/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date