2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

FILED Apr 20, 2007 08:00 Al Secretary of State DOCUMENT # P93000027567 1. Enlity Namo TRIAL COMMUNICATIONS, INC. Principal Place of Business Mailing Address 13022 VILLAGE CHASE CIRCLE 13022 VILLAGE CHASE CIRCLE TAMPA FL 33618 **TAMPA FL 33618** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & Stato City & State 4. FEI Number Applied For 65-0410838 Not Applicable Zin Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo SINGER, AMY 11712 N.W. 5TH ST. Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33325 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550,00 Trust Fund Contribution. | | Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D HILL Delete TITLE ☐ Change Addition SINGER, AMY NAME NAME U00000720256 05/01/07-80097-013 150.00 13022 VILLAGE CHASE CIRCLE STREET ADDRESS STREET ADDRESS **TAMPA FL 33618** CITY-ST-ZIP CITY-S1-ZIP DIL Delete DILL Change Addition NAMI NAME STREET ADDRESS STREET ADORESS CHY-S1-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY+ST-70P Delete ITTLE Change Addition NAMI NAMI STRUET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-70 Title ☐ Defete ШЩ Change Addition NAMI NAME. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP IIII ☐ Delete TITLE □ Change ■ Addition NAME STREET ADDRESS STREEL ADDRESS CITY-ST-ZIP CHY-ST-ZIP 12. I horoby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutos. 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 eath, that I am an officer or director of the corporation or the receiver or, tustee 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 omnowered.

my SINGER

SIGNATURE:

4-17-07