2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000088020

Entity Name: MULTCOM, INC.

FILED Apr 21, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
6187 NW 167 ST						
H7 HIALEAH, FL 33015 US						
Current Mailing Address:			ı	New Mailing Address:		
6187 NW 167 ST						
H7 HIALEAH, FL 33015 US						
FEI Number:	65-0541018	FEI Number Applied For ()	FEI Numb	per Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
ESTEVES, VALDIR 6187 NW 167 ST H7						
HIALEAH, FL 33015 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:						
	Electro	nic Signature of Registered Agent	nt		Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			į	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	RAMALHO, HE RUA FILOMEN) Delete ENRIQUE J JA BITOLO,141 DO DO CAMPO, BRAZI, SP 09640020	1	Fitle: Name: Address: Dity-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	NOGUEIRA, P RUA CIPRIAN) Delete AULO E O BARATA,1451 APT 273-B BRAZIL, SP 04205001	1	Fitle: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LIMA, ANTONI RUA FRANCA		1	Fitle: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DE JESUS, SO RUA APENINO) Delete DNIA M DS,471 APT 73 BRAZIL, SP 01533000	1	Fitle: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RAMALHO, HE RUA FILOMEN) Delete ENRIQUE J IA BITOLO, 141 DO DO CAMPO,BRAZIL, SP 09640020	1	Fitle: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OSHIRO, PAU RUA WINSTOI) Delete LO N CHURCHILL,600 D DO SUL, BRAZIL, SP 09581720	1	Fitle: Name: Address: City-St-Zip:	() Change () Addition	
I hereby certify that the information supplied with this filing does not qualify for the 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						

SIGNATURE: VALDIR ESTEVES RA 04/21/2006

above, or on an attachment with an address, with all other like empowered.