

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000094532

FILED  
May 04, 2009  
Secretary of State

Entity Name: PINNACLE COMMUNICATIONS INTERNATIONAL, INC.

**Current Principal Place of Business:**

9116 CYPRESS GREEN DRIVE  
JACKSONVILLE, FL 322561868

**New Principal Place of Business:**

**Current Mailing Address:**

9116 CYPRESS GREEN DRIVE  
JACKSONVILLE, FL 322561868

**New Mailing Address:**

FEI Number: 59-3350589

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVINE, WILLIAM A  
9116 CYPRESS GREEN DRIVE  
JACKSONVILLE, FL 322561868 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LEVINE, WILLIAM A  
Address: 9116 CYPRESS GREEN DRIVE  
City-St-Zip: JACKSONVILLE, FL 322561868

Title: VP ( ) Delete  
Name: LEVINE, STEPHANY  
Address: 9116 CYPRESS GREEN DRIVE  
City-St-Zip: JACKSONVILLE, FL 322561868

Title: COO ( ) Delete  
Name: LEVINE, MARK A  
Address: 9116 CYPRESS GREEN DRIVE  
City-St-Zip: JACKSONVILLE, FL 322561868

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

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

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: TERESA WAGNER

BPKR

05/04/2009

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

\_\_\_\_\_  
Date