


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 8:00 am
Secretary of State

03-09-2006 90160 044 ***150.00

DOCUMENT # P96000090390

1. Entity Name
INDUSTRIAL NETWORK COMMUNICATIONS, INCORPORATED




Principal Place of Business
 1135 DAILER DR
 APOPKA, FL 32712

Mailing Address
 1135 DAIMLER DR
 APOPKA, FL 32712

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 1135 Daimler Dr
 Suite, Apt. #, etc.

City & State
 Zip Country



03062006 Chg-P CR2E034 (11/05)

4. FEI Number
59-3407621

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent

MILLER, MICHAEL J
464 LAKE BRIDGE LA #1311
APOPKA, FL 32703

7. Name and Address of New Registered Agent

Name Michael J Miller
 Street Address (P.O. Box Number is Not Acceptable)
1135 Daimler Dr
 City Apopka **FL** Zip Code 32712

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 Michael J Miller DATE 3-6-06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, MICHAEL J 1135 DAIMLER DR APOPKA, FL 32712 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael J Miller 407-814-9039 3-6-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #