## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P97000049983**

1. Entity Name AMERICAN NETCOM, INC.



**FILED** Jan 17, 2008 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

819 S FEDERAL HWY

819 S FEDERAL HWY

STUART, FL 34994 US

STUART, FL 34994 US



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01142008	No Chg-P	CR2E034 (11/05)	
4. FEI Number			Applied For Not Applica
65-0758934		[	Not Applica

5. Certificate of Status Desired

\$8.75 Additional

Daytime Phone #

Not Applicable

BROTHERS, WILLIAM H 819 S FEDERAL HWY 106 STUART, FL 34994

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

OTOAKT,	1 1 0 100 1			
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered	Agent argnature required when reinstating)	DATE
FILE NOW!!! FEE 18 \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Finan Trust Fund Contribution.		
10.	OFFICERS AND DIREC	CTORS		
TITLE NAME STREET ADORESS CITY-ST-ZIP	PSTD BROTHERS, WILLIAM H 819 S FEDERAL HWY #106 STUART, FL 34994			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			; ;	U00000787983 01/18/08-80021-020 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		:	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			. IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby of indicated of the corchanged.	certify that the information supplied with this fi on this report or supplemental report is true a production or the receiver or trusted empowers or on an attachment with an address, with a	iling does not qualify for the exe and accurate and that my signate a to execute this report as required to the like empowered.	mptions contained in Chapter 119 ure shall have the same legal effected by Chapter 607, Florida Statute	<ol> <li>Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if</li> </ol>