

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S81143

FILED  
Apr 12, 2006  
Secretary of State

Entity Name: TRACI COMMUNICATIONS, INC.

## Current Principal Place of Business:

438 W HILLSBORO BLVD.  
DEERFIELD BEACH, FL 33441 US

## New Principal Place of Business:

550 FAIRWAY DRIVE  
#102  
DEERFIELD BEACH, FL 33441 US

## Current Mailing Address:

438 W HILLSBORO BLVD.  
DEERFIELD BEACH, FL 33441 US

## New Mailing Address:

550 FAIRWAY DRIVE  
#102  
DEERFIELD BEACH, FL 33441 US

FEI Number: 65-0333273      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHAPMAN, MALCOLM  
438 W. HILLSBORO BLVD.  
DEERFIELD BEACH, FL 33441 US

## Name and Address of New Registered Agent:

CHAPMAN, MALCOLM  
550 FAIRWAY DRIVE  
#102  
DEERFIELD BEACH, FL 33441 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: MALCOLM CHAPMAN

04/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: CHAPMAN, MALCOLM  
Address: 13 N.E. 12 STREET  
City-St-Zip: DELRAY BEACH, FL 33444

Title: D (X) Delete  
Name: CHAPMAN, MALCOLM  
Address: 13 N.E. 12 STREET  
City-St-Zip: DELRAY BEACH, FL 33444

Title: ST (X) Delete  
Name: CHAPMAN, MALCOLM  
Address: 13 N.E. 12 STREET  
City-St-Zip: DELRAY BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition  
Name: CHAPMAN, MALCOLM  
Address: 550 FAIRWAY DRIVE #102  
City-St-Zip: DEERFIELD BEACH, FL 33441

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 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: MALCOM CHAPMAN

PRES

04/12/2006

Electronic Signature of Signing Officer or Director

Date