## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000001071

Entity Name: INTERACTIVE METRONOME, INC.

FILED Apr 17, 2007 Secretary of State

		,			
Current Principal Place of Business:			New Principal Place of Business:		
	STON RD, STE , FL 33331	E 403			
Current Mailing Address:			New Mailing Address:		
	STON RD, STE , FL 33331	E 403			
FEI Number	: 65-1066624	FEI Number Applied For ( )	FEI Number Not Appl	icable ( ) Certificate of Sta	atus Desired ( )
Name and	Address of (	Current Registered Agent:	Name and	Address of New Registered	l Agent:
	STON RD, STE	E 403 US			
The above in the State	named entity e of Florida.	submits this statement for the	purpose of changing it	s registered office or registere	ed agent, or both,
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	_
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PCD ( EGGLESTON, 3075 OLD STII WESTON, FL		Title: Name: Address: City-St-Zip:	()Change ()Additi	on
Title: Name: Address: City-St-Zip:	STD ( WUKASCH, M/ 13230 SW 301 DAVIE, FL		Title: Name: Address: City-St-Zip:	()Change ()Additi	on
Title: Name: Address: City-St-Zip:	D ( FLOW, DON 1400 S. STRA' WINSTOM SAI		Title: Name: Address: City-St-Zip:	D (X) Change ( ) Additi RYAN, ROBERT J 150 N. MICHIGAN AVENUE, SUITE CHICAGO, IL 60601	
Title: Name: Address: City-St-Zip:	D ( GREENSPAN, 7201 GLENBR BETHESDA, M	OOK RD	Title: Name: Address: City-St-Zip:	()Change ()Additi	on
Title: Name: Address: City-St-Zip:	D ( ODLE, BRUCE 1103 LYTTON MATTHEWS, N	LANE	Title: Name: Address: City-St-Zip:	()Change ()Additi	on

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: MATTHEW WUKASCH STD 04/17/2007