


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 31, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F03000003483</b> 1. Entity Name <b>JAMES BROADCASTING INC.</b>	
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Principal Place of Business <b>9122 BAY SIDE CT. ORLANDO, FL 32819</b>	Mailing Address <b>9122 BAY SIDE CT. ORLANDO, FL 32819</b>
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01232005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3579216</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

**JAMES, FERDINAND L**  
**9122 BAY SIDE CT.**  
**ORLANDO, FL 32819**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC JAMES, FERDINAND L 9122 BAY SIDE CT. ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VVC GONZALEZ, CHERYL 2731 BLAIRSTONE ROAD #135 TALLAHASSEE, FL 32310
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LAKE, WILLIAM 59 GOLDEN AVE. A3 DEERPARK, NY 11747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

02/01/05-80026-001 158.75

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** FERDINAND L. JAMES  **1-24-05** **407-876-7276**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #