2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2004 8:00 am
Secretary of State
04-12-2004 90326 031 ***150.00

DOCUMENT # F97000000040

1. Entity Name

ADVANCED MEDIA TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
1520 S POWERLINE RD STE F DEERFIELD BEACH FL 33442	1520 S POWERLINE RD STE F DEERFIELD BEACH FL 33442

J48J1271U

MOORE CR2E034 (11/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0709244 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

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	C NAGAMATSU, TOSHIYUKI 222 N. SEPULVEDA BLVD., STE. 2200 EL SEGUNDO CA 90245	☐ Delete XX	C Bob Sunada 335 Madison Avenue New York, NY 10017	☐ Change ☐ Addition XX
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LAPTOOK, ERIC J 335 MADISON AVE NY NY 10017	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCET MOSCA, KEN 1520 S POWERLINE RD SUITE F DEERFIELD BEACH FL 33442	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DOF ALDERMAN, LUKE 1520 S POWERLINE RD SUITE F DEERFIELD BEACH FL 33442	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D Koki Sato 335 Madison Avenue New York, NY 10017	☐ Change ☒ Addition XX
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D Ray Shimizo 335 Madison Avenue New York, NY 10017	☐ Change ☒ Addition XX

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: Luke Alderman 3/4/04 954-427-5711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #