

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L63740

Entity Name: ON-BOARD MEDIA, INC.

FILED
Mar 30, 2009
Secretary of State

Current Principal Place of Business:

1691 MICHIGAN AVE
STE 600
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1691 MICHIGAN AVE
STE 600
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 65-0197349 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERT EICHNER
1691 MICHIGAN AVE
STE 600
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: OVC () Delete
Name: NORRIS, ROBIN
Address: 1691 MICHIGAN AVE STE 600
City-St-Zip: MIAMI BEACH, FL 33139

Title: OC () Delete
Name: BRENNAN, EDWARD J
Address: 4005-8 ONE EXCHANGE SQUARE
City-St-Zip: CENTRAL HONG KONG, NA CHINA

Title: OVT () Delete
Name: MICHAELIDES, ARES
Address: 8400 NW 36 STREET, STE 600
City-St-Zip: MIAMI, FL 33166

Title: OP () Delete
Name: EICHNER, ROBERT
Address: 1691 MICHIGAN AVE STE 600
City-St-Zip: MIAMI BEACH, FL 33139

Title: OS () Delete
Name: ZACHARIA, MICHAEL E
Address: 4005-8 ONE EXCHANGE SQUARE
City-St-Zip: CENTRAL HONG KONG, NA CHINA

Title: OAS () Delete
Name: SUZUKI, DAVID A
Address: 2255 KUHI O AVENUE
City-St-Zip: HONOLULU, HI 96815

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: ROBERT EICHNER

OP

03/30/2009

Electronic Signature of Signing Officer or Director

_____ Date