

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000157117

Entity Name: IWORKS MEDIA GROUP, INC.

FILED  
Mar 08, 2005  
Secretary of State

## Current Principal Place of Business:

4767 NEW BROAD STREET  
#1010  
ORLANDO, FL 32814 US

## New Principal Place of Business:

## New Mailing Address:

1175 SAN BLAS COVE  
WINTER SPRINGS, FL 32708 US

## Current Mailing Address:

4767 NEW BROAD STREET  
#1010  
ORLANDO, FL 32814 US

FEI Number: 20-1892609

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KANE, CARLA F  
1175 SAN BLAS COVE  
WINTER SPRINGS, FL 32708 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: CEO ( ) Delete  
Name: KANE, CARLA F  
Address: 1175 SAN BLAS COVE  
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: P ( ) Delete  
Name: CHANDLER, STEPHEN T  
Address: 25209 NORTHLAKE DR  
City-St-Zip: SANFORD, FL 32771 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: KANE, CARLA F  
Address: 1175 SAN BLAS COVE  
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: VP (X) Change ( ) Addition  
Name: CHANDLER, STEPHEN T  
Address: 1175 SAN BLAS COVE  
City-St-Zip: WINTER SPRINGS, FL 32708 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CARLA F KANE

P

03/08/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date