2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L63740

Entity Name: ON-BOARD MEDIA, INC.

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
1691 MICHI STE 600 MIAMI BEAG	IGAN AVE CH, FL 33139	US			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
1691 MICHIGAN AVE STE 600 MIAMI BEACH, FL 33139 US					
FEI Number:		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ROBERT EICHNER 1691 MICHIGAN AVE STE 600 MIAMI BEACH, FL 33139 US 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.					
SIGNATUR					
SIGNATUR		Signature of Registered Agent		Date	
Election Cam		rust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	OVC () D NORRIS, ROBIN 1691 MICHIGAN A MIAMI BEACH, FL	AVE STE 600	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OC () D BRENNAN, EDWA 4005-8 ONE EXC CENTRAL HONG	ARD J	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OVT () D MICHAELIDES, AI 8400 NW 36 STR MIAMI, FL 33166	RES EET, STE 600	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OP () D EICHNER, ROBER 1691 MICHIGAN A MIAMI BEACH, FL	RT AVE STE 600	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OS () D ZACHARIA, MICH. 4005-8 ONE EXC CENTRAL HONG	AEL E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OAS () D SUZUKI, DAVID A 2255 KUHIO AVEI HONOLULU, HI 9	NUE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 04/16/2008