

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L63740

Entity Name: ON-BOARD MEDIA, INC.**Current Principal Place of Business:**1691 MICHIGAN AVE
STE 600
MIAMI BEACH, FL 33139**Current Mailing Address:**1691 MICHIGAN AVE
STE 600
MIAMI BEACH, FL 33139 US**FEI Number:** 65-0197349**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RENO, SARAH B
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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name FIRESTONE, LOUISE
Address 19 EAST 57TH STREET
5TH FL.
City-State-Zip: NEW YORK NY 10022

Title PRESIDENT, CEO
Name NEUMANN, BETH
Address 1691 MICHIGAN AVENUE
SUITE 600
City-State-Zip: MIAMI FL 33139

Title VP, TREASURER
Name MICHAELIDES, ARES
Address 1691 MICHIGAN AVENUE
SUITE 600
City-State-Zip: MIAMI FL 33139

Title DIRECTOR
Name BRENNAN, EDWARD J
Address 1691 MICHIGAN AVENUE
SUITE 600
City-State-Zip: MIAMI FL 33139

Title CHAIRMAN
Name BRENNAN, EDWARD J
Address 1691 MICHIGAN AVENUE
SUITE 600
City-State-Zip: MIAMI FL 33139

Title VP
Name EICHNER, ROBERT
Address 1691 MICHIGAN AVENUE
SUITE 600
City-State-Zip: MIAMI FL 33139

Title VP
Name JOHNSON, MAUREEN
Address 19 EAST 57TH STREET
5TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name MICHAELIDES, ARES
Address 1691 MICHIGAN AVENUE
SUITE 600
City-State-Zip: MIAMI FL 33139

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I hereby 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 all other like empowered.

SIGNATURE: LOUISE FIRESTONE

SECRETARY

02/24/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	NEUMANN, BETH
Address	1691 MICHIGAN AVENUE SUITE 600
City-State-Zip:	MIAMI FL 33139