

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001071

FILED
Apr 24, 2008
Secretary of State

Entity Name: INTERACTIVE METRONOME, INC.

Current Principal Place of Business:

13794 NW 4TH ST., SUITE 204
SUNRISE, FL 33325

New Principal Place of Business:

Current Mailing Address:

13794 NW 4TH ST., SUITE 204
SUNRISE, FL 33325

New Mailing Address:

FEI Number: 65-1066624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ODLE, BRUCE
13794 NW 4TH ST., SUITE 204
SUNRISE, FL 33325 US

Name and Address of New Registered Agent:

WUKASCH, MATTHEW
13794 NW 4TH ST., SUITE 204
SUNRISE, FL 33325 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: MATTHEW WUKASCH

04/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: EGGLESTON, TOM
Address: 3075 OLD STILL LANE
City-St-Zip: WESTON, FL

Title: STD () Delete
Name: WUKASCH, MATT
Address: 13230 SW 30TH COURT
City-St-Zip: DAVIE, FL

Title: D () Delete
Name: RYAN, ROBERT J
Address: 150 N. MICHIGAN AVENUE, SUITE 2100
City-St-Zip: CHICAGO, IL 60601

Title: D () Delete
Name: GREENSPAN, STAN
Address: 7201 GLENBROOK RD
City-St-Zip: BETHESDA, MD

Title: D (X) Delete
Name: ODLE, BRUCE
Address: 1103 LYTTON LANE
City-St-Zip: MATTHEWS, NC 28104

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:

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: MATTHEW WUKASCH

STD

04/24/2008

Electronic Signature of Signing Officer or Director

Date