

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002808

FILED
Feb 07, 2008
Secretary of State

Entity Name: TELEFUTURA ORLANDO INC.

Current Principal Place of Business:

1999 AVENUE OF THE STARS
SUITE 3050
LOS ANGELES, CA 90067

New Principal Place of Business:

Current Mailing Address:

500 FRANK W. BURR BLVD.
TEANECK, NJ 07666802

New Mailing Address:

FEI Number: 52-1908346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CAHILL, ROBERT V
Address: 1999 AVENUE OF THE STARS, SUITE 3050
City-St-Zip: LOS ANGELES, CA 90067

Title: CFO () Delete
Name: HOBSON, ANDREW W
Address: 1999 AVENUE OF THE STARS, SUITE 3050
City-St-Zip: LOS ANGELES, CA 90067

Title: VP () Delete
Name: KRANWINKLE, C. DOUGLAS
Address: 1999 AVENUE OF THE STARS, SUITE 3050
City-St-Zip: LOS ANGELES, CA 90067

Title: CTO () Delete
Name: MCCANN, SHAWN
Address: 500 FRANK W BURR BLVD 6TH FLOOR
City-St-Zip: TEANECK, NJ 07666

Title: SVP () Delete
Name: LORI, PETER H
Address: 500 FRANK W BURR BLVD 6TH FLOOR
City-St-Zip: TEANECK, NJ 07666

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CFO (X) Change () Addition
Name: HOBSON, ANDREW W
Address: 500 FRANK W BURR BLVD
City-St-Zip: TEANECK, NJ 07666

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: DONALD PETERS

CPA

02/07/2008

Electronic Signature of Signing Officer or Director

Date