

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F03000001986

1. Entity Name
IDINE MEDIA GROUP INC.



Principal Place of Business
11900 BISCAYNE BLVD., 4TH FLOOR
MIAMI, FL 33181

Mailing Address
11900 BISCAYNE BLVD., 4TH FLOOR
MIAMI, FL 33181

FILED
04 APR 13 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business
2 N. RIVERSIDE PLAZA

Suite, Apt. #, etc.
#950

City & State
CHICAGO, IL

Zip
60606

Country
U.S.A.

3. Mailing Address
2 N. RIVERSIDE PLAZA

Suite, Apt. #, etc.
#950

City & State
CHICAGO, IL

Zip
60606

Country
U.S.A.

04072004 Chg-P CR2E034 (10/03)

4. FEI Number
46-0511768

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME BUBNOW, VICTOR
STREET ADDRESS 11900 BISCAYNE BLVD., 4TH FLOOR
CITY-ST-ZIP MIAMI, FL 33181

TITLE V ☒ Delete
NAME HILL, TOM
STREET ADDRESS 11900 BISCAYNE BLVD., 4TH FLOOR
CITY-ST-ZIP MIAMI, FL 33181

TITLE T ☒ Delete
NAME BORGES, GREGORY R
STREET ADDRESS 11900 BISCAYNE BLVD., 4TH FLOOR
CITY-ST-ZIP MIAMI, FL 33181

TITLE D ☒ Delete
NAME LERCH, STEPHEN E
STREET ADDRESS 11900 BISCAYNE BLVD., 4TH FLOOR
CITY-ST-ZIP MIAMI, FL 33181

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D ☐ Change ☒ Addition
NAME WEIDEMANN, GEORGES.
STREET ADDRESS 2 N. RIVERSIDE PLAZA #950
CITY-ST-ZIP CHICAGO, IL 60606

TITLE V/S/D ☐ Change ☒ Addition
NAME ADEL, BRYAN R.
STREET ADDRESS 2 N. RIVERSIDE PLAZA #950
CITY-ST-ZIP CHICAGO, IL 60606

TITLE T/D ☐ Change ☒ Addition
NAME POSNER, KENNETH R.
STREET ADDRESS 2 N. RIVERSIDE #950
CITY-ST-ZIP CHICAGO, IL 60606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bryan R. Adel

(BRYAN R. ADEL)

4-8-04

312-521-6767

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #