

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90030 023 ***150.00

DOCUMENT # F04000001838

1. Entity Name
REACH MEDIA INC.



Principal Place of Business
**13760 NOEL ROAD
SUITE 750
DALLAS, TX 75240-7336**

Mailing Address
**13760 NOEL ROAD
SUITE 750
DALLAS, TX 75240-7336**

40000000000000000000000000000000



03172008 No Chg-P CR2E034 (11/05)

4. FEI Number
75-3041453

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CAPITOL CORPORATE SERVICES INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	JOYNER, THOMAS E
STREET ADDRESS	13760 NOEL ROAD STE 750
CITY - ST - ZIP	DALLAS, TX 752407336
TITLE	V
NAME	KANTOR, DAVID
STREET ADDRESS	13760 NOEL ROAD STE 750
CITY - ST - ZIP	DALLAS, TX 752407336
TITLE	P
NAME	JOYNER, OSCAR
STREET ADDRESS	13760 NOEL ROAD STE 750
CITY - ST - ZIP	DALLAS, TX 752407336
TITLE	S
NAME	WEST, ROYCE
STREET ADDRESS	320 S. R.L. THORNTON FRWY, STE 300
CITY - ST - ZIP	DALLAS, TX 75203
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/2008 972-789-1058

Date

Daytime Phone #