## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000001354

Entity Name: PULSECAST INTERACTIVE CORPORATION

FILED Jan 13, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	REEKSHORE TON, FL 3349				
Current Mailing Address:			New Mailing Address:		
	REEKSHORE TON, FL 3349				
FEI Number	: 65-0837953	FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired ( )
Name and	l Address of (	Current Registered Agent:	Name and	Address o	f New Registered Agent:
19219 N C	FF, ROBERT CREEKSHORE TON, FL 3349				
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	d office or registered agent, or both,
SIGNATUI	RE:				
	Electron	nic Signature of Registered Ag	ent		Date
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	PTC ( MAGEDOFF, R 19219 N CREE BOCA RATON,	KSHORE CT	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VSVC ( MAGEDOFF, D 19219 N CREE BOCA RATON,	KSHORE CT	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D ( MAGEDOFF, A 215 E 95TH ST NEW YORK, N	REET	Title: Name: Address: City-St-Zip:	MAGEDOFF	(X) Change()Addition , ARI ROYCE DN STREET, SUITE 207S NJ 07030
Title: Name: Address: City-St-Zip:	D ( MAGEDOFF, R 11901 TUSCA ORLANDO, FL	LANE	Title: Name: Address: City-St-Zip:	MAGEDOFF	(X) Change ( ) Addition , ROSS LONDON .TES CLUB DR., #1518 FL 32825

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT MAGEDOFF PRES 01/13/2006