2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# F05000001614

Entity Name: UNIQUESCREEN MEDIA, INC.

Current Principal Place of Business:

4140 THIELMAN LANE, SUITE 110W
ST. CLOUD, MN 56301

New Principal Place of Business:

314 10TH AVENUE SOUTH
SUITE 160
WAITE PARK, MN 56387

Current Mailing Address:

4140 THIELMAN LANE, SUITE 110 W
ST. CLOUD, MN 56301

New Mailing Address:

314 10TH AVENUE SOUTH
SUITE 160
WAITE PARK, MN 56387

FEI Number: 41-1856486 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DCEO ( ) Delete
Name: MAYO, A. DALE
Address: 55 MADISON AVENUE, STE 300
City-St-Zip: MORRISTOWN, NJ 07960

Title: VP ( ) Delete
Name: BROWNSON, JOHN B
Address: 4140 THIELMAN LANE, SUITE 110W
City-St-Zip: ST. CLOUD, MN 56301

Title: VP ( ) Delete
Name: PFLUG, BRIAN
Address: 55 MADISON AVENUE, STE 300
City-St-Zip: MORRISTOWN, NJ 07960

Title: DS ( ) Delete
Name: LOFFREDO, GARY
Address: 55 MADISON AVENUE, STE 300
City-St-Zip: MORRISTOWN, NJ 07960

Title: P ( ) Delete
Name: MCGLAMERY, WILLIAM
Address: 4140 THIELMAN LANE, SUITE 110W
City-St-Zip: ST. CLOUD, MN 56301

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: GARY S. LOFFREDO S 04/29/2009

Electronic Signature of Signing Officer or Director — Date