2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2008
Secretary of State

DOCUMENT# F06000000877

Entity Name: MEDIA SPACE, INC.

Current Principal Place of Business:

101 MERRITT 7 CORPORATE PARK 3RD FL
NORWALK, CT 06851

New Principal Place of Business:

Current Mailing Address:

101 MERRITT 7 CORPORATE PARK 3RD FL
NORWALK, CT 06851

New Mailing Address:

FEI Number: 06-1351564 **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: C ( ) Delete
Name: MENCHACA, ANTHONY
Address: 7 MEADOW VIEW DRIVE
City-St-Zip: WESTPORT, CT 06880

Title: D ( ) Delete
Name: INVESTMENTS, SENECA
Address: C/O JERRY NEUMANN, 502 RIDGEWOOD AVENUE
City-St-Zip: GLEN RIDGE, NJ 07028

Title: P ( ) Delete
Name: KERR, D. SCOT
Address: 12 LYNNBROOK ROAD
City-St-Zip: TRUMBULL, CT 06611

Title: VP ( ) Delete
Name: COHEN, BETH S
Address: 3 FARMVIEW DRIVE
City-St-Zip: BETHEL, CT 06801

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:

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: BETH S. COHEN VP 01/03/2008

Electronic Signature of Signing Officer or Director — Date