

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000273

FILED
Apr 23, 2008
Secretary of State

Entity Name: RESEARCH AND ANALYSIS OF MEDIA OF AMERICAS INC.

Current Principal Place of Business:

757 BEAR RIDGE DRIVE NW
ISSAQUAH, WA 98027

New Principal Place of Business:

Current Mailing Address:

757 BEAR RIDGE DRIVE NW
ISSAQUAH, WA 98027

New Mailing Address:

FEI Number: 37-1536815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR STE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

BUSCH, ROBERT
236 PABLO ROAD
PONTE VEDRA BEACH, FL 32082 US

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: ROBERT BUSCH

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: KARLSSON, JOHAN
Address: DRABANTVGEN 31 SE-132 47 SALRS JO-BOO
City-St-Zip: SWEDEN,

Title: VC () Delete
Name: GUSTAFSSON, MAX
Address: EKVAGEN 20 SE-186 70 BROTTY
City-St-Zip: SWEDEN,

Title: D () Delete
Name: HULTEN, STAFFAN
Address: RAGVAGEN 9 SE-752 52 UPPSALA
City-St-Zip: SWEDEN,

Title: D () Delete
Name: FRISKOPP, OLA
Address: SKONSTAHOLMSVAGEN 105 SR-123 60 FARSTA
City-St-Zip: SWEDEN,

Title: DPT () Delete
Name: WOOD, LARRY
Address: 757 BEAR RIDGE DRIVE NW
City-St-Zip: ISSAQUAH, WA 98027

Title: D () Delete
Name: BUSH, ROBERT
Address: 236 PABLO ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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:

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: LARRY WOOD

DPT

04/23/2008

Electronic Signature of Signing Officer or Director

Date