

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000002123

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

**Entity Name:** AUTOMEDIA SOLUTIONS, INC.

**Current Principal Place of Business:**

2459 W. 208TH ST.,SUITE 101  
TORRANCE, CA 905016206

**New Principal Place of Business:**

**Current Mailing Address:**

2459 W. 208TH ST.,SUITE 101  
TORRANCE, CA 905016206

**New Mailing Address:**

**FEI Number:** 95-4783373

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

O'NEIL, SUSAN M  
6996 PIAZZA GRANDE AVE., SUITE 309  
ORLANDO, FL 32835 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

**OFFICERS AND DIRECTORS:**

**Title:** PC  
**Name:** HAMLIN, DOUG  
**Address:** 2459 W. 208TH ST.,SUITE 101  
**City-St-Zip:** TORRANCE, CA 905016206

**Title:** V  
**Name:** FLEMION, MARSHALL  
**Address:** 6996 PIAZZA GRANDE AVE., SUITE 309  
**City-St-Zip:** ORLANDO, FL 328356206

**Title:** SDT  
**Name:** O'NEIL, SUSAN  
**Address:** 6996 PIAZZA GRANDE AVE., SUITE 309  
**City-St-Zip:** ORLANDO, FL 32835

I hereby 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 all other like empowered.

**SIGNATURE:** SUSAN O'NEIL

SDT

01/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date