## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F97000004856

Entity Name: CEEBRAID-SIGNAL II, INC.

FILED May 06, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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250 SOUTH AUSTRALIAN AVENUE 250 SOUTH AUSTRALIAN AVENUE WEST PALM BEACH, FL 33401 SUITE 1003

WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

250 SOUTH AUSTRALIAN AVENUE 250 SOUTH AUSTRALIAN AVENUE WEST PALM BEACH, FL 33401 SUITE 1003

WEST PALM BEACH, FL 33401

FEI Number: 65-0790454 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT ( ) Delete Title: PT (X) Change ( ) Addition

Name: SCHLESSINGER, JASON Name: SCHLESINGER, JASON

Address: 250 SOUTH AUSTRALIAN AVE Address: 250 SOUTH AUSTRALIAN AVE, SUITE 1003

City-St-Zip: WEST PALM BEACH, FL City-St-Zip: WEST PALM BEACH, FL

Title: VS ( ) Delete Title: VS (X) Change ( ) Addition

Name: SCHLESINGER, ADAM Name: SCHLESINGER, ADAM

Address: 250 SOUTH AUSTRALIAN AVE Address: 250 SOUTH AUSTRALIAN AVE, SUITE 1003

City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JASON SCHLESINGER P 05/06/2005