2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2007
Secretary of State

DOCUMENT# L02000024038

Entity Name: WAVECOM MEDIA , LLC

Current Principal Place of Business:

943 W. CHARING CROSS CIR.
LAKE MARY, FL 32746 US

New Principal Place of Business:

705 FALLING LEAF CT.
DELAND, FL 32724 US

Current Mailing Address:

943 W. CHARING CROSS CIR.
LAKE MARY, FL 32746 US

New Mailing Address:

705 FALLING LEAF CT.
DELAND, FL 32724 US

FEI Number: 55-0797415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ABBOTT, GLEN R
943 W. CHARING CROSS CIR.
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

ABBOTT, GLEN R
705 FALLING LEAF CT.
DELAND, FL 32724 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: GLEN ABBOTT 04/16/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ABBOTT, GLEN R
Address: 943 W. CHARING CROSS CIR.
City-St-Zip: LAKE MARY, FL 32746 US

Title: MGRM ( ) Delete
Name: PEREZ, LUIS R
Address: 5114 OTTERS DEN TRAIL
City-St-Zip: SANFORD, FL 32771 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ABBOTT, GLEN R
Address: 705 FALLING LEAF CT.
City-St-Zip: DELAND, FL 32724 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GLEN ABBOTT MGRM 04/16/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date