

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L52856

Entity Name: MEDIAIDERS, INC.

FILED  
Jan 04, 2005  
Secretary of State

## Current Principal Place of Business:

115 NW 2ND AVE  
FT LAUDERDALE, FL 33311 US

## New Principal Place of Business:

## Current Mailing Address:

115 NW 2ND AVE  
FT LAUDERDALE, FL 33311 US

## New Mailing Address:

FEI Number: 65-0179644      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HARDIN, DAVID  
500 E. BROWARD BLVD  
SUITE 1950  
FT. LAUD, FL 33394 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: D ( ) Delete  
Name: BARON, GARY,  
Address: 3300 CORPORATE AVE, SUITE 108  
City-St-Zip: FT LAUDERDALE, FL

Title: D ( ) Delete  
Name: BILLINGTON, TAYLOR  
Address: 3300 CORPORATE AVE, SUITE 108  
City-St-Zip: FT LAUDERDALE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: GARY BARON

D

01/04/2005

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

\_\_\_\_\_  
Date