

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000003010

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: ACADEMIC INTERACTIVE MEDIA, INC.

Current Principal Place of Business:

8770 SW 72ND STREET, #314
MIAMI, FL 331733512

New Principal Place of Business:

Current Mailing Address:

8770 SW 72ND STREET, #314
MIAMI, FL 331733512

New Mailing Address:

FEI Number: 65-0974439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZ, SCOTT
8770 SW 72ND STREET, #314
MIAMI, FL 331733512

Name and Address of New Registered Agent:

KATZ, ANNE
12367 SW 144 TERRACE
MIAMI, FL 33186

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: ANNE KATZ

05/01/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KATZ, SCOTT
Address: 12367 SW 144 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: VPD () Delete
Name: JOHNSTON, DALE
Address: 406 N. FRANKLIN STREET
City-St-Zip: PLANT CITY, FL 33566

Title: SD (X) Delete
Name: YURISH, GREGORY
Address: 26101 SW 167 AVENUE
City-St-Zip: MIAMI, FL 33031

Title: TD (X) Delete
Name: KATZ, ANNE
Address: 12367 SW 144 TERRACE
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST (X) Change () Addition
Name: KATZ, ANNE
Address: 12367 SW 144 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: VPD (X) Change () Addition
Name: KATZ, SCOTT
Address: 12367 SW 144 TERRACE
City-St-Zip: MIAMI, FL 33186

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: ANNE KATZ

PDST

05/01/2002

Electronic Signature of Signing Officer or Director

Date