2004 FOR PROFIT CORPORATION ANNUAL REPORT

May 03, 2004 08:00 AM Secretary of State **DOCUMENT # P00000082795** 1. Entity Name IN-FÓCUS MEDIA INC. Principal Place of Business Mailing Address 4133 STONEFIELD DR 4133 STONEFIELD DR ORLANDO, FL 32826 ORLANDO, FL 32826 02042004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3668048 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LESNICK, WILLIAM DO NOT WRITE 4133 STONE FIELD DR ORLANDO, FL 32826 IN THIS SPACE 3. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable. (NCSF: Registered Actor signature required when respective) DATE \$5.00 May Be Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NARAF LESNICK, WILLIAM STREET ADDRESS 4133 STONEFIELD DR CSTY-ST-ZIP ORLANDO, FL 32826 000000151559 05/04/04-80051-012 150.00 nneNAME STREET ADDRESS CITY-ST-ZIP TITE E NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CATY-ST-ZIP TITLE NAME STREET ADDRESS CTY-51-ZP THLE NAME STREET ADDRESS CRY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify 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 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 bustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an another like empowered.

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/04

407-29-8855

FILED