

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2002 8:00 am
Secretary of State

08-15-2002 90047 012 ***550.00



DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000027779

1. Entity Name
 CALDWELL MEDIA GROUP, INC. ✓

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|---|---|
| Principal Place of Business 18352 NORTHWEST 68TH AVENUE UNIT H MIAMI FL 33015 | Mailing Address 18352 NORTHWEST 68TH AVENUE UNIT H MIAMI FL 33015 |
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| 2. Principal Place of Business 2031 Dewey St Suite, Apt. #, etc. # 101 | 3. Mailing Address 550 Cranes Way Suite, Apt. #, etc. # 224 |
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| City & State Hollywood, FL | City & State Altamonte Springs, FL |
| Zip 33020 | Zip 32701 |

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|--|---|
| 4. FEI Number 65-1086450 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name Shirley Caldwell
Street Address (P.O. Box Number is Not Acceptable)
 550 Cranes Way #224
City Altamonte Springs **FL** **Zip Code** 32701

8. 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 Shirley Caldwell **DATE** 7/29/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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|--|--|---|
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/> | FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State | 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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11. OFFICERS AND DIRECTORS

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|---|---|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSTD CALDWELL, JOHN P 18352 NORTHWEST 68TH AVENUE UNIT H MIAMI FL 33015 | <input type="checkbox"/> Delete |
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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|---|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2031 Dewey St #101 Hollywood, FL 33020 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
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13. I hereby certify that the information supplied with this filing 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED **DATE** 7/29/02 **DAYTIME PHONE #** 407-678-2621

CR2E034 (4/02)