2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000034368

Entity Name: ANDROMEDA COMMUNICATIONS, INC.

FILED Apr 30, 2003 Secretary of State

6051 SW 45TH STREET

DAVIE, FL 33314

6045 SW 45TH STREET

DAVIE, FL 33314

Current Mailing Address: New Mailing Address:

6051 SW 45TH STREET 6045 SW 45TH STREET DAVIE, FL 33314 DAVIE, FL 33314

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BURNS, MICHAEL A
6051 SW 45TH ST
DAVIE, FL 33314 US

BURNS, MICHAEL A
498 SW 34TH STREET, SUITE 101
FT. LAUDERDALE, FL 33315 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: 04/30/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete

 Name:
 CASSIDY, FRANCIS M

 Address:
 6045 SW 45TH STREET

City-St-Zip: DAVIE, FL 33314

 Title:
 V
 () Delete

 Name:
 BURNS, MICHAEL A

 Address:
 6051 SW 48TH STREET

 City-St-Zip:
 DAVIE, FL 33314

Title: ST () Delete Name: FANTACONE, THOMAS

Address: 6051 SW 45TH STREET
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: V (X) Change () Addition

Name: BURNS, MICHAEL A

Address: 498 SW 34TH STREET, SUITE 101 City-St-Zip: FT. LAUDERDALE, FL 33315

Title: ST (X) Change () Addition

Name: FANTACONE, THOMAS

Address: 498 SW 34TH STREET, SUITE 101 City-St-Zip: FT. LAUDERDALE, FL 33315

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: THOMAS FANTACONE ST 04/30/2003