2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000026451

Entity Name: WORLD MULTICAST MEDIA, INC.

FILED Jul 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

245 SOUTH GROVE STREET

VENICE, FL 34292

2083 TIMUCUA TRAIL
NOKOMIS, FL 34275

Current Mailing Address: New Mailing Address:

PO BOX 1303 PO BOX 1303

NOKOMIS, FL 34275 NOKOMIS, FL 34274

FEI Number: 32-0030684 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BROWN, JOSEPH D

104 MARGARET DRIVE

NOKOMIS, FL 34275 US

BROWN, JOSEPH D

2083 TIMUCUA TRAIL

NOKOMIS, FL 34275 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: JOSEPH D. BROWN 07/24/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 BROWN, JOSEPH
 Name:
 BROWN, JOSEPH

 Address:
 245 SOUTH GROVE STREET
 Address:
 PO BOX 1303

 City-St-Zip:
 VENICE, FL 34292
 City-St-Zip:
 NOKOMIS, FL 34274

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 STANLEY, BÖNNIE F
 Name:
 STANLEY, BÖNNIE F

 Address:
 245 SOUTH GROVE STREET
 Address:
 PO BOX 1303

 City-St-Zip:
 VENICE, FL 34292
 City-St-Zip:
 NOKOMIS, FL 34275

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOSEPH D. BROWN PD 07/24/2006