2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000026109

Entity Name: VIZOR SPORTS MEDIA, INC.

FILED Apr 11, 2005 Secretary of State

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

835 MERIDIAN AVE 1505 SW 11TH TERRACE MIAMI, FL 33135 #12

MIAMI BEACH, FL 33139 US

New Mailing Address: Current Mailing Address:

835 MERIDIAN AVE 1505 SW 11TH TERRACE MIAMI, FL 33135 US

MIAMI BEACH, FL 33139 US

FEI Number: 48-1302364 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JONES, TIFFANI T D'OVIDIO, DAVID 7925 SW 86 ST 1505 SW 11TH TERRACE #904 MIAMI, FL 33135 MIAMI, FL 33143 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: DAVID D'OVIDIO 04/11/2005

> Electronic Signature of Registered Agent Date

> > Title:

VP/D

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

VΡ

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title: () Delete Title: (X) Change () Addition DIERSINS, YAMAS Name: Name: DIERSING, JIM 2501 SW 109 TER 2501 SW 109 TER Address: Address:

City-St-Zip: **DAVIE, FL 33328** City-St-Zip: DAVIE, FL 33328

D'OVIDIO, DAVID A Name: D'OVIDIO, DAVID A Name: 835 MERIDIAN AVE #12 1505 SW 11TH TERRACE Address: Address:

MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip: MIAMI, FL 33135

() Delete Title: Title: ST/D (X) Change () Addition LOVEMAN, ELLIOT LOVEMAN, ELLIOT Name: Name:

6300 KILLIAN DR 6300 KILLIAN DR Address: Address: City-St-Zip: PINECREST, FL 33155 City-St-Zip: PINECREST, FL 33156

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

GROSSKOPF, STEPHEN Name: Name: Address: Address: 151 TERN COURT City-St-Zip: City-St-Zip: LOXAHATCHEE, FL 33470

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: ELLIOT LOVEMAN ST 04/11/2005