2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000045065

Entity Name: VIBEZ COMMUNICATIONS INC.

FILED Aug 25, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3600 S. STATE ROAD 7 SUITE 312 MIRAMAR, FL 33023 **Current Mailing Address: New Mailing Address:** 3600 S. STATE ROAD 7 SUITE 312 MIRAMAR, FL 33023 FEI Number: 57-1164058 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: FEARON, ALVA 410 NW 184TH TERR MIAMI, FL 33169 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FEARON, ALVA Name: Name: 410 NW 184 TERR Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: Title: Title: () Delete () Change () Addition FEARON, NATALIE Name: Name: 410 NW 184 TERR Address: Address: MIAMI, FL 33169 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition SAMUELS, O'NEIL Name: Name: 16920 NW 19TH AVE Address: Address: City-St-Zip: CORAL CITY, 33 056 City-St-Zip: Title: () Delete Title: () Change () Addition DELLSSER, FITZROY Name: Name: Address: 2228 NW 171 TERRACE Address: City-St-Zip: HOLLYWOOD, FL 33028 City-St-Zip: Title: Title: () Change (X) Addition () Delete CHA-FONG, PATRICK A Name: Name: Address: 1465 NW 21 TERRACE Address: City-St-Zip: City-St-Zip: MIAMI, FL 33142 Title: () Delete Title: BOD () Change (X) Addition Name: Name: JONES, LEWEN 3600 SOUTH SR 7 STE 306 Address: Address: City-St-Zip: City-St-Zip: MIRAMAR, FL 33023

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: ALVA FEARON CEO 08/25/2004