## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000067693

SPINDLER, BRIAN

City-St-Zip: MIAMI, FL 33166

8033 NE 36TH STREET STE 438

Name:

Address:

Entity Name: MEDIA DIGEST, INC.

FILED Feb 24, 2006 Secretary of State

Littly Nai	ile. MICDIA D	IGEOT, INC.			
Current P	rincipal Place	of Business:	New Principal Place of Business:		
8033 NE 3 MIAMI, FL	6TH STREET 33166	STE 438			
Current Mailing Address:			New Mailing Address:		
8033 NE 3 MIAMI, FL	6TH STREET 33166	STE 438			
FEI Number:	04-3763162	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:	
200 EAST	DAVID F ESQ LAS OLAS BL RDALE, FL 3				
	named entity see of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE: DAVID H	ANLEY			
	Electror	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	COHEN, ANDY	Delete STREET STE 438 66	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CURTIS, TOM	Delete STREET STE 438 66	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	JONES, DAVE	Delete STREET STE 438 66	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	AULTMAN, DAV	STREET STE 438	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D ()	Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE:	DAVE AULTMAN	D	02/24/2006