2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000074849

Entity Name: ALLIANCE MEDIA, INC.

DELRAY BEACH, FL 33444 US

() Delete

City-St-Zip:

SD

GAGER, LISA

4213 NW 88TH AVENUE

SUNRISE, FL 33351 US

Title:

Name:

Address:

City-St-Zip:

FILED Sep 27, 2005 Secretary of State

•	
Current Principal Place of Business:	New Principal Place of Business:
1725 SW 32 STREET FORT LAUDERDALE, FL 33315 US	1725 SW 32 STREET 100 FORT LAUDERDALE, FL 33315 US
Current Mailing Address:	New Mailing Address:
1725 SW 32 STREET FORT LAUDERDALE, FL 33315 US	1725 SW 32 STREET 100 FORT LAUDERDALE, FL 33315 US
FEI Number: 65-1199912 FEI Number Applied For () FEI Number	mber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
FLORIO, ANTHONY 1725 SW 32 STREET FORT LAUDERDALE, FL 33315 US	FLORIO, ANTHONY 1725 SW 32 STREET 100 FORT 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: ANTHONY FLORIO	09/27/2005
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 Name: FLORIO, ANTHONY Address: 1725 SW 32ND ST City-St-Zip: FT LAUDERDALE, FL 33315	Title: () Change () Addition Name: Address: City-St-Zip:
Title: VTD () Delete Name: FINE, NANCY Address: 1125 CRYSTAL WAY A	Title: () Change () Addition Name: Address:

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

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: ANTHONY FLORIO PD 09/27/2005

() Change () Addition