2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078844

Entity Name: CABLEORGANIZER.COM, INC.

FILED Feb 25, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace Of Dusiliess.

1141 SOUTHEAST 9TH TERRACE 108 E. MCNAB ROAD

POMPANO BEACH, FL 33060 US POMPANO BEACH, FL 33060 US

Current Mailing Address: New Mailing Address:

1141 SOUTHEAST 9TH TERRACE 108 E. MCNAB ROAD

POMPANO BEACH, FL 33060 US POMPANO BEACH, FL 33060 US

FEI Number: 20-0094859 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:

AUSTIN & PAYNE P.A. 11575 HERON BAY BOULEVARD SUITE 315

SUITE 315 CORAL SPRINGS, FL 33076 US HOLSTEIN, PAUL D 1141 SE 9TH TERRACE POMPANO BEACH, FL 33060 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: PAUL HOLSTEIN 02/25/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: P () Delete Title: () Change () Addition

 Name:
 HOLSTEIN, VALARIE
 Name:

 Address:
 1141 SOUTHEAST 9TH TERRACE
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33060 US
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 HOLSTEIN, PAUL
 Name:

 Address:
 1141 SOUTHEAST 9TH TERRACE
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33060 US
 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: PAUL HOLSTEIN VP 02/25/2004