

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094956

Entity Name: M.D.C. SKY.TV INC

FILED  
Apr 29, 2004  
Secretary of State

## Current Principal Place of Business:

9765 SOUTHBROOK DRIVE  
APT 4302  
JACKSONVILLE, FL 32266

## Current Mailing Address:

9765 SOUTHBROOK DRIVE  
APT 4302  
JACKSONVILLE, FL 32266

## New Principal Place of Business:

9675 OLD BAYMEADOWS ROAD  
APT 02  
JACKSONVILLE, FL 32256

## New Mailing Address:

9675 OLD BAYMEADOWS ROAD  
APT 02  
JACKSONVILLE, FL 32256

FEI Number: 32-0091727

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARRANZA, DORA L  
9765 SOUTHBROOK DRIVE  
APT 4302  
JACKSONVILLE, FL 32266 US

## Name and Address of New Registered Agent:

CARRANZA, DORA L  
9675 OLD BAYMEADOWS ROAD  
APT 02  
JACKSONVILLE, FL 32256 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: DORA L CARRANZA

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CARRANZA, DORA L  
Address: 9765 SOUTHBROOK DRIVE APT 4302  
City-St-Zip: JACKSONVILLE, FL 32266

Title: VP ( ) Delete  
Name: MORENO, MARIO  
Address: 9765 SOUTHBROOK DRIVE APT 4302  
City-St-Zip: JACKSONVILLE, FL 32266

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CARRANZA, DORA L  
Address: 9675 OLD BAYMEADOWS ROAD APT 2  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change ( ) Addition  
Name: MORENO, MARIO  
Address: 9675 OLD BAYMEADOWS ROAD APT 2  
City-St-Zip: JACKSONVILLE, FL 32256

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: DORA L CARRANZA

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date