

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000139340

FILED
Feb 17, 2005
Secretary of State

Entity Name: CLONELESS MEDIA, INC.

Current Principal Place of Business:

1111 SW 16TH AVE #22
GAINESVILLE, FL 32601 US

New Principal Place of Business:

618 NE 4TH AVE
GAINESVILLE, FL 32601 US

Current Mailing Address:

1111 SW 16TH AVE #22
GAINESVILLE, FL 32601 US

New Mailing Address:

618 NE 4TH AVE.
GAINESVILLE, FL 32601 US

FEI Number: 20-0693615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIKOLAIDIS, ADAM
1111 SW 16TH AVE #22
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

NIKOLAIDIS, ADAM
618 NE 4TH AVE.
GAINESVILLE, FL 32601 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: ADAM NIKOLAIDIS

02/17/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NIKOLAIDIS, ADAM
Address: 1111 SW 16TH AVE #22
City-St-Zip: GAINESVILLE, FL 32601 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NIKOLAIDIS, ADAM
Address: 618 NE 4TH AVE.
City-St-Zip: GAINESVILLE, FL 32601 US

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: ADAM NIKOLAIDIS

D

02/17/2005

Electronic Signature of Signing Officer or Director

Date