

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000019169

FILED  
Jun 29, 2005  
Secretary of State

Entity Name: PUBLIC MEDIA PRODUCTIONS, INC.

## Current Principal Place of Business:

5113 STRATTON AVENUE  
TAMPA, FL 33624

## New Principal Place of Business:

5113 STRATTON AVENUE  
TAMPA, FL 33624 US

## Current Mailing Address:

5113 STRATTON AVENUE  
TAMPA, FL 33624

## New Mailing Address:

5113 STRATTON AVENUE  
TAMPA, FL 33624 US

FEI Number: 59-3781031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLOBODOW, GEORGE  
8741 SW 96TH LANE #F  
OCALA, FL 34481 US

## Name and Address of New Registered Agent:

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:

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:

Title: P ( ) Delete  
Name: SLOBODOW, ARLEN  
Address: 5113 STRATTON AVENUE  
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete  
Name: SLOBODOW, VIVIAN  
Address: 5113 STRATTON AVENUE  
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete  
Name: SLOBODOW, GEORGE  
Address: 5113 STRATTON AVENUE  
City-St-Zip: TAMPA, FL 33624

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
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: ARLEN SLOBODOW

P

06/29/2005

Electronic Signature of Signing Officer or Director

Date