

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000022104

Entity Name: MEDIA SPADE, INC.

FILED  
Apr 24, 2006  
Secretary of State

## Current Principal Place of Business:

7289 CATALINA ISLE DRIVE  
LAKE WORTH, FL 33467 US

## New Principal Place of Business:

124 ROCK CREEK LN  
CANTON, GA 30114 US

## Current Mailing Address:

6542 HYPOLUXO ROAD #165  
LAKE WORTH, FL 33467 US

## New Mailing Address:

110 PROMINENCE POINT PARKWAY  
SUITE #114-165  
CANTON, GA 30114 US

FEI Number: 20-0689700

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DISTEFANO, JAMES L  
Address: 7289 CATALINA ISLE DRIVE  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: D ( ) Delete  
Name: DISTEFANO, MOLLISA S  
Address: 7289 CATALINA ISLE DRIVE  
City-St-Zip: LAKE WORTH, FL 33467 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DISTEFANO, JAMES L  
Address: 124 ROCK CREEK LN  
City-St-Zip: CANTON, GA 30114 US

Title: D (X) Change ( ) Addition  
Name: DISTEFANO, MOLLISA S  
Address: 124 ROCK CREEK LN  
City-St-Zip: CANTON, GA 30114 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JAMES L DISTEFANO

D

04/24/2006

Electronic Signature of Signing Officer or Director

Date