2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2007 08:00 A Secretary of State

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DOCUMENT # P04000026575 1. Entity Name AONE MEDIA INC.					Sec	cretary of Sta
Principal Plac 3100 NORTH SUITE 200 HOLLYWOOD	1 29TH COURT	Mailing Address 3100 NORTH 29TH COURT SUITE 200 HOLLYWOOD, FL 33020			1450, 1550, 1450, 1450, 4500, 4500	IL 1840 LANK BURN ALAK BURNAK IN 1861
DO NOT WRITE IN THIS SPAC			CE	04282007 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent DEUTSCH, NEAL R 3100 NORTH 29TH COURT SUITE 200 HOLLYWOOD, FL 33020			DO NOT WRITE IN THIS SPACE			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees						
10. OFFICERS AND DIRECTORS TITLE P/D NAME DEUTSCH, NEAL R STREET ADDRESS 3100 NORTH 29TH COURT SUITE 200 HOLLYWOOD, FL 33020 TITLE S/D NAME SCHNITZER, GERALD S STREET ADDRESS 3100 NORTH 29TH COURT SUITE 200 HOLLYWOOD, FL 33020 TITLE NAME STREET ADDRESS CITY-ST-ZIP				NOT WR THIS SPA		
TITLE			1			

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

H3007

Daytime Phone #