

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2008 8:00 am
Secretary of State

02-27-2008 90001 002 ***150.00

DOCUMENT # P05000006891 1. Entity Name MEDIA MASTERS GROUP, INC.	
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Principal Place of Business 4720 SALISBURY RD., SUITE 28 JACKSONVILLE, FL 32256	Mailing Address 4720 SALISBURY RD., SUITE 28 JACKSONVILLE, FL 32256
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DO NOT WRITE IN THIS SPACE

66003830



01072008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2184381	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SADEGHIAN, TRACY L 4720 SALISBURY ROAD SUITE 28 JACKSONVILLE, FL 32256
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**DO NOT WRITE
IN THIS SPACE**

8. The above party 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.

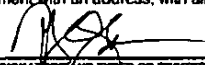
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$350.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P. SADEGHIAN, TRACY L 4720 SALISBURY RD STE 28 JACKSONVILLE, FL 32256
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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:  **3-11-08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #