2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000015543

Entity Name: GO LIVE, INC.

FILED Jan 22, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

POST OFFICE BOX 272431 5418 WEST CRENSHAW ST

TAMPA, FL 33688 TAMPA, FL 33634

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 272431 TAMPA, FL 33688

FEI Number: 20-4234428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JEFFREY A. DOWD, P.A.

609 W. LUMSDEN

BRANDON, FL 33511 US

FIDI, JOHN C MR

5418 WEST CRENSHAW ST

TAMPA, FL 33634 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: JOHN C FIDI 01/22/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition

Name: FIDI, KIMBERLY A Name: FIDI, KIMBERLY A
Address: POST OFFICE BOX 272431 Address: 5418 WEST CRENSHAW ST

City-St-Zip: TAMPA, FL 33688 City-St-Zip: TAMPA, FL 33634

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name: FIDI, JOHN C Name: FIDI, JOHN C

Address: POST OFFICE BOX 272431 Address: 5418 WEST CRENSHAW ST

City-St-Zip: TAMPA, FL 33688 City-St-Zip: TAMPA, FL 33634

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: JOHN C FIDI VP 01/22/2007