

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000067871

Entity Name: INTERMEDIA, INC.

FILED  
May 30, 2007  
Secretary of State

## Current Principal Place of Business:

8567 CORAL WAY  
#321  
MIAMI, FL 33155 US

## New Principal Place of Business:

## Current Mailing Address:

8567 CORAL WAY  
#321  
MIAMI, FL 33155 US

## New Mailing Address:

FEI Number: 01-0868654      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DEL VALLE, NYDIA  
8567 CORAL WAY  
#321  
MIAMI, FL 33155 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: DEL VALLE, NYDIA  
Address: 8567 CORAL WAY  
City-St-Zip: MIAMI, FL 33155 US

Title: D (X) Delete  
Name: DEL VALLE, NYDIA  
Address: 8567 CORAL WAY  
City-St-Zip: MIAMI, FL 33155 US

Title: SEC (X) Delete  
Name: FIGUERAS, ILKA H  
Address: 8567 CORAL WAY  
City-St-Zip: MIAMI, FL 33155 US

Title: DIR (X) Delete  
Name: FIGUERAS, ILKA H  
Address: 8567 CORAL WAY  
City-St-Zip: MIAMI, FL 33155 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DEL VALLE, NYDIA  
Address: 8567 CORAL WAY #321  
City-St-Zip: MIAMI, FL 33155 US

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 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: NYDIA DEL VALLE

PD

05/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date