2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109989

Entity Name: SILVERSTREAM MEDIA INCORPORATED

FILED Sep 08, 2007 Secretary of State

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

1585 BRUSHED DUNES CIRCLE 159 SOUTH 2ND STREET

FREEPORT, FL 32439 SANTA ROSA BEACH, FL 32459

Current Mailing Address: New Mailing Address:

1585 BRUSHED DUNES CIRCLE PO BOX 1884

FREEPORT, FL 32439 SANTA ROSA BEACH, FL 32459

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

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

WHEELER, MICHAEL T
1585 BRUSHED DUNES CIRCLE
WHEELER, MICHAEL T
159 SOUTH 2ND STREET

FREEPORT, FL 32439 US SANTA ROSA BEACH, FL 32459 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: MICHAEL T WHEELER 09/08/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition WHEELER, MICHAEL T WHEELER, MICHAEL T Name: Name: 1585 BRUSHED DUNES CIRCLE 159 SOUTH 2ND STREET Address: Address: City-St-Zip: FREEPORT, FL 32439 City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VP () Delete Title: VP (X) Change () Addition Name: NEWMAN, JACOB R Name: NEWMAN, JACOB R Address: 1585 BRUSHED DUNES CIRCLE Address: 252 PLANTATION WAY

City-St-Zip: FREEPORT, FL 32439 City-St-Zip: SANTA ROSA BEACH, FL 32459

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

 Name:
 SCHLAFER, JOHN F
 Name:

 Address:
 1585 BRUSHED DUNES CIRCLE
 Address:

 City-St-Zip:
 FREEPORT, FL 32439
 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: MICHAEL T WHEELER P 09/08/2007