

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011114

Entity Name: TRAVEL NETWORKS MEDIA, INC.

FILED
Sep 02, 2008
Secretary of State

Current Principal Place of Business:

2450 NE 15TH AVENUE, SUITE 310
WILTON MANORS, FL 333054

New Principal Place of Business:

2450 NE 15TH AVENUE
APT. 310
WILTON MANORS, FL 33305 US

Current Mailing Address:

2450 NE 15TH AVENUE, SUITE 310
WILTON MANORS, FL 333054

New Mailing Address:

2450 NE 15TH AVENUE
APT. 310
WILTON MANORS, FL 33305 US

FEI Number: 74-3254055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOULD, DAVID F
27 NE 23 AVENUE SUITE 3
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

GOULD, DAVID F
2450 NE 15TH AVENUE
APT. 310
WILTON MANORS, FL 33305 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: DAVID F. GOULD

09/02/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOULD, DAVID F
Address: 27 NE 23 AVENUE SUITE 3
City-St-Zip: POMPAN0 BEACH, FL 33062

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: GOULD, DAVID F
Address: 2450 NE 15TH AVENUE/APT. 310
City-St-Zip: WILTON MANORS, FL 33305 US

Title: MS. () Change (X) Addition
Name: MCCALL, DAWN
Address: 5111 CAPE COD COURT
City-St-Zip: BETHESDA, MD 20816 US

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: DAVID F. GOULD

MR.

09/02/2008

Electronic Signature of Signing Officer or Director

Date