

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000086738

FILED
Feb 12, 2008
Secretary of State

Entity Name: DORI MEDIA AMERICA, INC.

Current Principal Place of Business:

2525 PONCE DE LEON BOULEVARD, SUITE 400
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2525 PONCE DE LEON BOULEVARD, SUITE 400
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 26-0638706 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MACAULAY, ROBERT B
2525 PONCE DE LEON BOULEVARD, SUITE 400
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ST. JOHN, GREGORY
700 SOUTH FEDERAL HIGHWAY, STE 200
BOCA RATON, FL 33432 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: GREGORY ST. JOHN 02/12/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PALT, NADAV
Address: 2525 PONCE DE LEON BOULEVARD, SUITE 400
City-St-Zip: CORAL GABLES, FL 33134

Title: CEOP () Delete
Name: ESCALANTE, JOSE
Address: 2525 PONCE DE LEON BLVD., SUITE 400
City-St-Zip: CORAL GABLES, FL 33134

Title: S () Delete
Name: ESCALANTE, JOSE
Address: 2525 PONCE DE LEON BLVD., SUITE 400
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NADAV PALT D 02/12/2008

Electronic Signature of Signing Officer or Director Date