2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 13, 2006 8:00 am Secretary of State 03-13-2006 90059 004 ***150.00 DOCUMENT # P10163 1. Entity Name INITIATIVE MEDIA WORLDWIDE, INC. Principal Place of Business Mailing Address 5700 WILSHIRE BLVD 13801 FNB PARKWAY SUITE 400 OMAHA, NE 68154 LOS ANGELES, CA 90026 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03012006 CR2E034 (11/05) City & State City & State Applied For 4. FELNumber 95-2666662 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICES COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. treasurer TITLE TITLE Change Addition ☐ Delete noeutot usus BIVENS, CAROLYN F NAME 1114 AUGNUE OF THE AMERICAS 5700 WILSHIRE BLVD #400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LOS ANGELES, CA 90036 CITY-ST-ZIP NEW YOLK, MY 16036 VPT TITLE Delete TITLE ∞ ALEC GERSTER CONTE, ALBERT NAME NAME ONE DAG HAMMERSKJOLD PLAZA 1114 AVENUE OF THE AMERICAS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10036 CITY-ST-ZIP NEW YORK, NY 10017 TITLE TITLE Change Addition □ Delete CAMERA, NICHOLAS J NAME JACQUELLUE STONE 13801 FUB PARKWAY OMAHA, NE 68154 1271 AVENUE OF THE AMERICAS, 44TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10020 CITY-ST-ZIP **CFO** Defete TITLE ☐ Addition SANDERS, MARK NAME NAME ONE DAG HAMMERSKJOLD PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10017 City-St-ZIP ☐ Change ☐ Defete TITLE VP TITLE ☐ Addition MEGEL, STEVE NAME STREET ADDRESS 13801 FNB PARKWAY STREET ADDRESS CITY-ST-ZIP **OMAHA, NE 68154** CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is to and facturate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address. With all other like empowered.

D NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

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402-965-4720

FILED