2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 06, 2007
Secretary of State

DOCUMENT# P28796

Entity Name: MILES MEDIA GROUP, INC.

Current Principal Place of Business:

6751 PROFESSIONAL PARKWAY WEST
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

6751 PROFESSIONAL PARKWAY WEST
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 65-0163180 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, PARKER, HARRISON, DIETZ
200 S. ORANGE AVE.
SARASOTA, FL 34236 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MILES, ROGER W
Address: 6751 PROFESSIONAL PKY WEST
City-St-Zip: SARASOTA, FL 34240

Title: D ( ) Delete
Name: COMEY, ROBERT A
Address: 101 SECOND ST SE #800
City-St-Zip: CEDAR RAPIDS, IA

Title: V ( ) Delete
Name: BERLIN, STEPHEN
Address: 6751 PROFESSIONAL PKWY WEST
City-St-Zip: SARASOTA, FL 34240

Title: V ( ) Delete
Name: WINKLE, PAUL
Address: 6751 PROFESSIONAL PKWY WEST
City-St-Zip: SARASOTA, FL 34240

Title: VST ( ) Delete
Name: BARTENS, WILLIAM
Address: 6751 PROFFESIONAL PKWY W
City-St-Zip: SARASOTA, FL 34240

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

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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: LEE, CHRISTOPHER
Address: 1100 WILSON BLVD., #3000
City-St-Zip: ARLINGTON, VA 22209

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM BARTENS VST 04/06/2007

Electronic Signature of Signing Officer or Director — Date