2006 FOR PROFIT CORPORATION

FILED Apr 25, 2006 8:00 am Secretary of State

04-25-2006 90116 032 ***150.00

ANNUAL REPORT	ľ
DOCUMENT # P40036	

1. Entity Nam RADIOSU		CENTERS, INC.								
•	e of Business		Mailing Address					9	50016	369
	ERPRISE CRT S St, ca 92630		26250 ENTERPRISE (LAKE FOREST, CA 92			1 INTINETI IN RE	:PII 88IN 88189 IIII 81		iei Bewii Madia dide	
2. Principal P	Place of Busine	ss	3. Mailing Address							
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.			04182006	Chg-P	CR2E0	34 (11/05)	
City & Stat	te		City & State			4. FEI Number 33-0522	445		J	olied For Applicable
Zip		Country	Zìp	Count	try	5. Certificate of	f Status Desired		\$8.75 Add Fee Required	
	6. Name a	and Address of Current Re	egistered Agent			7. Name and A	ddress of New F	Registered A	Agent	
C T CORP	PORATION	SYSTEM			Name					
1200 SOU		LAND ROAD			Street Address	(P.O. Box Number	is Not Acceptabl	le)		
					City			FL	Zip Code)
8. The above	named entity	submits this statement for t	the purpose of changing if	ts registere	ed office or registe	ared agent or both	in the State of Fl		familiar with	and accont
the obligat	tions of registe	red agent.	inis parpood or onlinging in	io rogistore	o chica or registo	agont, or total	, in the state of th	iorida, Talli	icatemica witti, e	and accept
SIGNATURE	Signature, typed o	r printed name of registered agent an	d little if applicable. (NO	OTE: Registered	d Agent signature require	d when reinstating)		DATE		
FIL After M	Signature, typed o	FEE IS \$150.00 Fee will be \$550.00	9. Election Camp Trust Fund Cor	aign Finan	ncing \$5	id when reinstating) 5.00 May Be ded to Fees		DATE		
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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 of supplemental report is true and accurate 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 particulate 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. BRIAN G DRAZBA, SIP! (40,04/19/06 (949)282-6000

SIGNATURE: