

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000003841

FILED
Jan 18, 2008
Secretary of State

Entity Name: INFORMATION TELEVISION NETWORK, INC.

Current Principal Place of Business:

621 N.W. 53RD STREET
STE. 350
BOCA RATON, FL 33487 US

New Principal Place of Business:

6650 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

Current Mailing Address:

621 N.W. 53RD STREET
STE. 350
BOCA RATON, FL 33487 US

New Mailing Address:

6650 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

FEI Number: 65-0351256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LERNER, EDWARD
621 NW 53RD ST, STE 350
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

LERNER, EDWARD
6650 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 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: ED LERNER

01/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LERNER, EDWARD
Address: 621 NW 53RD ST, STE 350
City-St-Zip: BOCA RATON, FL

Title: DVPS () Delete
Name: LERNER, ANA C
Address: 621 NW 53RD ST, STE 350
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LERNER, EDWARD
Address: 6650 PARK OF COMMERCE BLVD
City-St-Zip: BOCA RATON, FL 33487

Title: DVPS (X) Change () Addition
Name: LERNER, ANA C
Address: 6650 PARK OF COMMERCE BLVD
City-St-Zip: BOCA RATON, FL 33487

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: ANA C LERNER

DVPS

01/18/2008

Electronic Signature of Signing Officer or Director

Date