2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000005187

FILED Apr 26, 2005 Secretary of State

Entity Nai	me: MADY M	ULTIMEDIA, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
STE 2	OGERS CIR TON, FL 3348	37			
Current M	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
STE 2	OGERS CIR TON, FL 3348	37 01			
FEI Number	: 65-0394108	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent	: Name and Address of	f New Registered Agent:	
NAEEM, MADY 1141 S. ROGERS CIR STE 2 BOCA RATON, FL 33434 US			NAEEM, MADY 1141 S. ROGERS CIR STE 2 BOCA RATON, FL 33-	487 US	
	e named entity e of Florida.	submits this statement for t	he purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				04/26/2005	
	Electro	nic Signature of Registered	Agent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VD (MADY, EDMUN 1141 S. ROGE BOCA RATON,	RS CIR STE 2	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (MADY, NAEEM 1141 S. ROGE BOCA RATON,	RS CIR STE 2	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHELLE FACCIOLA CONT 04/26/2005