2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P93000031857

1. Entity Name

FLORIDA RADIO REALTY, INC.



FILED Apr 02, 2008 08:00 AN Secretary of State

Principal Place of Business

2340 WATERSIDE DR FORT LAUDERDALE, FL 33312 Mailing Address

C/O IVAN A GOMEZ 601 BRICKELL KEY DR, SUITE 507 MIAMI, FL 33131



01222008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0418820 Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

IAG CORPORATE SERVICES, INC 601 BRICKELL KEY DR STE 507 MIAMI, FL 33131

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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	Il applicable (NOTE: Registered	Agent signature	required when reinstaling)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000877950
10.	OFFICERS AND DIREC	CTORS			04714708-80035-016 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEDERSEN, DAVID A 6 PORT SIDE DR FORT LAUDERDALE, FL 33316				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PUDSEY, RICHARD F 2340 WATERSIDE DR FORT LAUDERDALE, FL 33312				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filling 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 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 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.

SIGNATURE

CITY-ST-ZIP

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E. Pudsa, Director

(205)371-921

Oaytime Phone #