2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000090777

Entity Name: Z-92, INC.

FILED May 02, 2006 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|---|---|----------------------------------|---|-----------------------------------|--|
| 1000 LEGIC SUITE 1700 ORLANDO, |) | US | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| 1000 LEGIC SUITE 1700 ORLANDO, |) | US | | | |
| FEI Number: | 59-3298042 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | |
| SHUFFIELD, W. CHARLES 1000 LEGION PLACE SUITE 1700 ORLANDO, FL 32801 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: | | | | | |
| | Electror | nic Signature of Registered Ager | nt | Date | |
| In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | | | |
| Title: Name: Address: City-St-Zip: | DPC () MOADY, SAID 2307 LAKESID ORLANDO, FL | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () GIBSON, JANE 627 GENIUS DI ORLANDO, FL | RIVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () SHUFFIELD, K 2307 LAKESID ORLANDO, FL | E DR | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () STRACK, GAR` 3318 LAKEVIE LONGWOOD, F | W OAKS DR | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () HANSON, MICH 7350 HULL RD ZIONSVILLE, IN | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | DP () NATHAN, CHIT 1344 SPRING I ORLANDO, FL | LAKE DRIVE | 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 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 | | | | | |

SIGNATURE: NATHAN CHITTY MR. 05/02/2006

above, or on an attachment with an address, with all other like empowered.