

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000051879

FILED
Jan 15, 2009
Secretary of State

Entity Name: AMERICAN INFORMATION MEDIA, INC.

Current Principal Place of Business:

3001 JENNINGS DR
SARASOTA, FL 34239 US

New Principal Place of Business:

Current Mailing Address:

1605 MAIN STREET SUITE 1001
SAASOTA, FL 34236

New Mailing Address:

FEI Number: 65-0591854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDSMITH, STANLEY A
1605 MAIN STREET SUITE 1001
SAASOTA, FL 34236 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPAS () Delete
Name: CARALLO, MICHAEL F
Address: 1605 MAIN STREET SUITE 1001
City-St-Zip: SARASOTA, FL 34236

Title: ST () Delete
Name: CARALLO, SHARON
Address: 1605 MAIN ST SUITE 1001
City-St-Zip: SARASOTA, FL 34236

Title: AT () Delete
Name: CARALLO, MICHAEL F
Address: 1605 MAIN STREET SUITE 1001
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SHARON CARALLO

ST

01/15/2009

Electronic Signature of Signing Officer or Director

_____ Date