2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 14, 2005 08:00 AM **DOCUMENT # P97000009465 Secretary of State** 1. Entity Name KRASNOW MEDIA, INC. Principal Place of Business Mailing Address C/O VOGEL & FOX 1480 N. OCEAN BLVD 1140 AVE OF THE AMERICAS, SUITE 707 PALM BEACH, FL 33480_ NEW YORK, NY 10036 US CR2E034 (10/03) 01032005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0724327 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box 6. Name and Address of Current Registered Agent KOEPPEL, JOEL P DO NOT WRITE 222 LAKEVIEW AVE. **STE 260** IN THIS SPACE WEST PALM BECH, FL 33401 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE KRASNOW ROBERT NAME STREET ADDRESS 1480 N. OCEAN BLVD, CITY-ST-ZIP PALM BEACH, FL 33480 VP <u>U00000180652</u> FOX, LESTER NAME 01/14/05-80016-003 150.00 1480 N. OCEAN BLVD. STREET ADDRESS CITY-ST-ZIP PALM BEACH, FL 33480 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify 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 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:

NAME STREET ADDRESS CITY-ST-ZIP

JAN 0 6 2005

Daytime Phone #