


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 05, 2007 8:00 am**  
**Secretary of State**

07-05-2007 90060 043 \*\*\*150.00

<b>DOCUMENT # P97000024854</b>	
1. Entity Name <b>U.S. MEDIA, INC.</b>	

Principal Place of Business <b>ONE SOUTH OCEAN BLVD SUITE 320 210 BOCA RATON, FL 33432 US</b>	Mailing Address <b>ONE SOUTH OCEAN BLVD SUITE 320 210 BOCA RATON, FL 33432 US</b>
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2. Principal Place of Business - No P.O. Box # <b>ONE South Ocean Blvd</b>	3. Mailing Address <b>ONE South Ocean Blvd.</b>
Suite, Apt. #, etc. <b>Suite 210</b>	Suite, Apt. #, etc. <b>Suite 210</b>
City & State <b>BOCA RATON FL.</b>	City & State <b>BOCA RATON FL.</b>
Zip <b>33432</b>	Zip <b>33432</b>
Country <b>USA</b>	Country <b>USA</b>

401-77



07032007 Chg-P CR2E034 (12/06)

4. FEI Number <b>65-0734175</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>PETRUZZELLI, THERESA A ONE SOUTH OCEAN BLVD SUITE 320 210 BOCA RATON, FL 33432</b>	
7. Name and Address of New Registered Agent Name <b>Petrizzelli, THERESA A.</b> Street Address (P.O. Box Number is Not Acceptable) <b>ONE South Ocean Blvd.</b> <b>Suite 210</b> City <b>BOCA RATON</b> FL <b>33432</b>	

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.

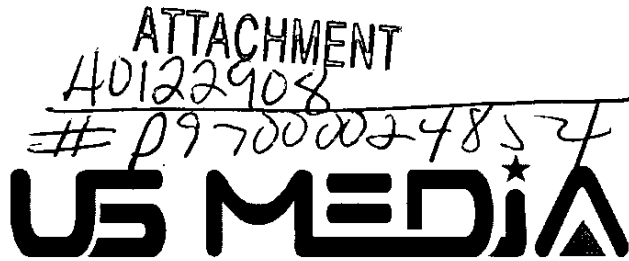
SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PETRUZZELLI, THERESA A ONE SOUTH OCEAN BLVD, SUITE 320 210 BOCA RATON, FL 33432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST BUSCEMI, JUDITH 756 BARCELONA DR BOCA RATON, FL 33432 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing 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: *Ch Pet* **7/3/7** **561-393-6005**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



Divisions of Corporations

PO Box 1500

Tallahassee, FL. 32302-1500

Prior Notice by postcard  
was not received.

PLEASE waive the additional  
Late Fee. Thank you.

Theresa Petruzzelli

THERESA Petruzzelli

One South Ocean Blvd., Suite 210  
Boca Raton, FL 33432  
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Fax: 561-393-6008  
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