

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

05-30-2002 91601 036 ***150.00

02 JUN 25 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

674162

DOCUMENT # **P97000060186**
1. Entity Name
AIR MEDIA NOW!, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1130 Celebration Blvd.
Suite, Apt. #, etc.

3. Mailing Address
1130 Celebration Blvd.
Suite, Apt. #, etc.

City & State
Celebration, Florida

City & State
Celebration, Florida

4. FEI Number
65-1096613

Applied For
Not Applicable

Zip
34747

Country

Zip
34747

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Robert C. Hackney
Street Address (P.O. Box Number is Not Acceptable)
2000 PGA Blvd. Suite 4410

City
Palm Beach Gardens FL Zip Code
33410

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.

SIGNATURE

[Signature]

Registered Agent

5/23/02
DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution: ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	President/ Director Joseph Sineno Jr. 1130 Celebration Blvd. Celebration, FL 34747
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	CEO/Secretary/ Director Sean O'Brien 1130 Celebration Blvd. Celebration, FL 34747
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Chairman/ Director Ivan Irana 1130 Celebration Blvd. Celebration, FL 34747
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **SEAN M O'BRIEN**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JRM 200 **407-566-2550**
DATE DAYTIME PHONE

CR2E034B (12/01)