

AMENDED UBR

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

FILED

02 JUL -2 AM 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

pg 7000060186

1. Entity Name

AIR MEDIA NOW!, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

311 Park Place Blvd.

3. Mailing Address

311 Park Place Blvd.

Suite, Apt. #, etc.

Suite 340

Suite, Apt. #, etc.

Suite 340

City & State

Clearwater, FL

City & State

Clearwater, FL

Zip

33759

Country

Zip

33759

Country

4. FEI Number

65-1096613

Applied For

Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent, and date if applicable.

Registered Agent

DATE

6/26/02

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- ST- ZIP
President/ Director
Joseph Sineno Jr.
311 Park Place Blvd. #340
Clearwater, FL 33759

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

900006229299--
-07/05/02--01070--011
*****61.25 *****61.25

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
CEO/ Secretary/ Director
Sean O'Brien
311 Park Place Blvd. #340
Clearwater, FL 33759

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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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 as an attachment with an address, with all other like empowered.

SIGNATURE:

Sean O'Brien

Sean O'Brien

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)