


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000061498

1. Entity Name
 1480 EAST RADIO, INC.



Principal Place of Business Mailing Address

1425 HOLIDAY BLVD 1425 HOLIDAY BLVD
 MERRITT ISLAND, FL 32952 MERRITT ISLAND, FL 32952

DO NOT WRITE IN THIS SPACE



04112005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 59-3454195 Not Applicable

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

6. Name and Address of Current Registered Agent

MIGLIORE, FREDRICK J
 1425 HOLIDAY BLVD
 MERRITT ISLAND, FL 32952

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (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 Trust Fund Contribution. \$5.00 May Be Added to Fees

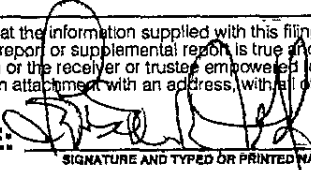
10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MIGLIORE, FREDERICK J
STREET ADDRESS	1425 HOLIDAY BLVD
CITY-ST-ZIP	MERRITT ISLAND, FL 32952
TITLE	D
NAME	CARR, DIANE L
STREET ADDRESS	1425 HOLIDAY BLVD
CITY-ST-ZIP	MERRITT ISLAND, FL 32952
TITLE	D
NAME	PORZIO, PAUL
STREET ADDRESS	7824 MARTHA'S LANE
CITY-ST-ZIP	FALLS CHURCH, WV 22043
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

000000301805
 04/13/05-80042-021 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  4/11/05 321-452-6036

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #