FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000012734

WORLD MEDIA, INC.

KINETIX

FILED Apr 28, 2002 8:00 am Secretary of State 04-28-2002 90780 029 ***150.00

DO NOT WRITE IN THIS SPACE				6 4 2 0 2 2
2. Principal Place of Business 11032 Sw 16 th MANOR Suite, Apt. #, etc.		3. Mailing Address 11.032 SC Suite, Apt. #, etc.	s 16th Manoa	DO NOT WRITE IN THIS SPACE
City & Star		City & State D A VIE	FL	4. FEI Number Applied For Applied For 65-0814035 Not Applicable
3332	4 Country USA	^{Zip} 33324	Country USA	5. Certificate of Status Desired \$8.75 Additional Fee Required
	DO NOT	WRITE	Name Street Address	7. Name and Address of Current Registered Agent VES STEIN (P.O. Box Number is Not Acceptable)
IN THIS SPACE			11032	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bo				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 After May 1, Fee is \$55 Amended UBR is \$61 Make Check Payable to Departr				10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
11.		AND DIRECTORS		
TITLE	PRESIDENT		TITLE	•
NAME STREET ADDRESS	YVES STEIN 11032 SW 1	6th MANAZ	NAME STREET ADDRESS	·
CITY-ST-ZIP	DAVIE FL		CITY-ST-ZIP	*
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CITY-ST-ZIP			CITY-ST-ZIP	13380
13. I hereby certify that the information supplied with this filing 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

NINTED NAME OF SIGNING OFFICER OR DIRECTOR