2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000023900

FILED Jan 09, 2007 Secretary of State

Entity Nar	me: RADIO O	F VERO, INC.			
Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
2255 GLAI SUITE 221 BOCA RA		1			
Current M	lailing Addres	s:	New Mailing Address	New Mailing Address:	
2255 GLAD SUITE 221 BOCA RA		1			
FEI Number:	: 65-0833832	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ROBENSTEIN, MITCHELL 2255 GLADES RD, 221 BOCA RATON, FL 33431 US			2255 GLADES RD, 221	RUBENSTEIN, MITCHELL 2255 GLADES RD, 221 BOCA RATON, FL 33431 US	
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: MITCHELL RUBENSTEIN				01/09/2007	
		ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSD () SILVERS, LAUF 2255 GLADES BOCA RATON,	RD, # 221	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	TDCE () RUBENSTEIN, I 2255 GLADES BOCA RATON,	RD, # 221	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	EVP () WEISS, HOWA 2255 GLADES BOCA RATON,	RD, #237W	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	EVP () MCALLAN, ROE 2255 GLADES		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: LAURIE S. SILVERS **PSD** 01/09/2007

BOCA RATON, FL 33431

City-St-Zip: