

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 07, 2004 8:00 am
Secretary of State

06-07-2004 90003 029 ***150.00

DOCUMENT # P98000044764

1. Entity Name
TECHNOMEDIA, INC.



Principal Place of Business,
4902 SW 72 AVENUE
MIAMI, FL 33144 US

Mailing Address
4902 SW 72 AVENUE
MIAMI, FL 33144 US

54056960



2. Principal Place of Business

4902 SW 72 Avenue

Suite, Apt. #, etc.

3. Mailing Address

4902 SW 72 Avenue

Suite, Apt. #, etc.

03132003

Chg-P

CR2E034 (10/03)

City & State

Miami

City & State

FL

4. FEI Number

65-0854799

Applied For

Not Applicable

Zip

33155

Country

USA

Zip

33155

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

RODRIGUEZ, FABIAN
4902 SW 72 AVENUE
MIAMI, FL 33144

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **RODRIGUEZ, FABIAN**
STREET ADDRESS **4902 SW 72 AVENUE**
CITY-ST-ZIP **MIAMI, FL 33144**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **4902 SW 72 Avenue**
CITY-ST-ZIP **Miami FL 33155**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 1/2004

Date

Daytime Phone #

ATTACHMENT

540526960

#PF8000044764

June 3/04

TO:
DIVISION OF CORPORATIONS

Dear Sir

Attached please find form and please
correct our zip code to 33155.

Thanks!

Zabian B
