2008 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** May 02, 2008 08:00 AN Secretary of State DOCUMENT # P99000040486 PHOENIX BROADCASTING COMPANY Principal Place of Business Mailing Address 121 114TH AVE N 121 114TH AVE N ST.PETERSBURG, FL 33716 ST.PETERSBURG, FL 33716 04242008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. l'El Number Applied For 59-3575676 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KIBURZ, DANIEL DO NOT WRITE 121 114TH AVE N SAINT PETERSBURG, FL 33716 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. Signature in cold or contest purpo of registerest liggert and tyle if anothrough (NOTE Hopisteria) Apost signature registrative se reprodute U00000942508 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 05/29/08-80022-013 150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS THILE MALE KIBURZ, DANIEL A STREET ADDRESS 121 114TH AVE N CUTY ST ZIP SAINT PETERSBURG, FL 33716 TIBLE NAME STREET ADDRESS CITY ST ZIP TITLE NAME STPLET ADDRESS DO NOT WRITE CITY ST ZIF IN THIS SPACE HILE CIALIE STREET ADDRESS CHY ST ZIP DILE NAME

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under loath, 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 of changed, or on an attaching with an address with all other like empowed directions.

SIGNATURE:

STREET ADDRESS CHY SI ZIP HILL NAME STREET ADDRESS CITY ST ZIP