

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000046695

FILED
Apr 15, 2004
Secretary of State

Entity Name: TELE KING COMMUNICATIONS CORPORATION

Current Principal Place of Business:

11900 BISCAYNE BLVD
SUITE 520
MIAMI, FL 33181

New Principal Place of Business:

Current Mailing Address:

11900 BISCAYNE BLVD
SUITE 520
MIAMI, FL 33181

New Mailing Address:

FEI Number: 65-0923778 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHREIBER, FRANK
11900 BISCAYNE BOULEVARD.
STE. #520
MIAMI, FL 33181 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: SCHREIBER, FRANK
Address: 11900 BISCAYNE BOULEVARD., STE 520
City-St-Zip: MIAMI, FL 33181

Title: D () Delete
Name: SCHREIBER, FRANK
Address: 11900 BISCAYNE BOULEVARD., STE 520
City-St-Zip: MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: FRANK SCHREIBER

MR.

04/15/2004

Electronic Signature of Signing Officer or Director

_____ Date