


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 30, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000043825	
1. Entity Name I2I MEDIA, INC.	

Principal Place of Business 1493 SHADOWMOSS CIRCLE LAKE MARY, FL 32746	Mailing Address 1493 SHADOWMOSS CIRCLE LAKE MARY, FL 32746
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DO NOT WRITE IN THIS SPACE



08252004 No Chg-P CR2E034 (10/03)

4. FEI Number 03-0430268	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145	

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reissuing) _____ DATE _____

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

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GLOS, ALEXANDER 1493 SHADOWMOSS CIRCLE LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST GLOS, NATALIA 1493 SHADOWMOSS CIRCLE LAKE MARY, FL 32746
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U00000171153
08/30/04-80006-011 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 my business, with all other like empowered.

SIGNATURE:  **Alexander Glos.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-25-04 **407833892**
Date Daytime Phone #