

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000106274

Entity Name: THICKEN IT STUDIOS, INC.

FILED  
Apr 12, 2012  
Secretary of State

**Current Principal Place of Business:**

4712 NW 57TH LANE  
CORAL SPRINGS, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

4712 NW 57TH LANE  
CORAL SPRINGS, FL 33067

**New Mailing Address:**

FEI Number: 26-3828757

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MARTIN, CHRISTOPHER C  
4712 NW 57TH LANE  
CORAL SPRINGS, FL 33067 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

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: MARTIN, CHRISTOPHER C  
Address: 4712 NW 57TH LANE  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D  
Name: MARTIN, CHRISTOPHER C  
Address: 4712 NW 57TH LANE  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: V  
Name: SEDILLO-BEADDELL, LEANNE  
Address: 4712 NW 57TH LANE  
City-St-Zip: CORAL SPRINGS, FL 33067

I hereby 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 all other like empowered.

SIGNATURE: CHRISTOPHER C MARTIN

PST

04/12/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date