

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000083806

Entity Name: PSYONIC STUDIOS, INC.

FILED
May 01, 2005
Secretary of State

Current Principal Place of Business:

677 SW 111 AVE.
#301
PEMBROKE PINES, FL 33025

New Principal Place of Business:

809 NW 89 AVE
PLANTATION, FL 33324

Current Mailing Address:

677 SW 111 AVE.
#301
PEMBROKE PINES, FL 33025

New Mailing Address:

809 NW 89 AVE
PLANTATION, FL 33324

FEI Number: 59-3739994

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOMQUIST, CHRISTOPHER W
677 SW 111 AVE. #303
PEMBROKE PINES, FL 33025 US

Name and Address of New Registered Agent:

BLOMQUIST, CHRISTOPHER W
809 NW 89 AVE
PLANTATION, FL 33324 US

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: CHRISTOPHER W BLOMQUIST

05/01/2005

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: BLOMQUIST, CHRISTOPHER W
Address: 677 SW 111 AVE. #303
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: BLOMQUIST, CHRISTOPHER W
Address: 809 NW 89 AVE
City-St-Zip: PLANTATION, FL 33324

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: CHRISTOPHER W BLOMQUIST

PSTD

05/01/2005

Electronic Signature of Signing Officer or Director

Date