2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2009
Secretary of State

DOCUMENT# N02000008505

Entity Name: RATTLE THE CAGE PRODUCTIONS INC.

Current Principal Place of Business:

620 SW 16TH STREET
FORT LAUDERDALE, FL 33315

New Principal Place of Business:

Current Mailing Address:

1126 S. FEDERAL HWY., STE. 288
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 42-1563897 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORSKI, TIMOTHY M
620 SW 16TH STREET
FORT LAUDERDALE, FL 33315 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: PD ( ) Delete
Name: GORSKI, TIMOTHY M
Address: 620 SW 16TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: D ( ) Delete
Name: SILIDKER, VALERIE
Address: 8061 S.W. 20TH PLACE
City-St-Zip: DAVIE, FL 33324

Title: D ( ) Delete
Name: SHANNON, ALYSSA
Address: 2501 N.E. 11TH STREET, APT. 6
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: COO ( ) Change (X) Addition
Name: SEWALELOT, TERESA
Address: 2311 E 10TH ST
City-St-Zip: AUSTIN, TX 78702

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIM GORSKI P 02/18/2009

Electronic Signature of Signing Officer or Director — Date