



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2007 08:00 AM
Secretary of State

DOCUMENT # 404722 1. Entity Name STUDIO EAST, INC.			
Principal Place of Business 74 NE 4TH AVE #3 DELRAY BEACH, FL 33483 US		Mailing Address 74 NE 4TH AVE #3 DELRAY BEACH, FL 33483 US	
DO NOT WRITE IN THIS SPACE			
		 03082007 No Chg-P CR2E034 (11/05)	
4. FEI Number 59-1407739		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LITTLE, S DEAN 727 CURLEW ROAD DELRAY BEACH, FL 33444		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 _____ DATE _____ <small>(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		DO NOT WRITE IN THIS SPACE 000000668763 03/27/07-80044-009 150.00	
D GESSLER, CARL J 2710 YALE LN. BOYNTON BCH, FL 00000,			
STD LITTLE, DEBORAH G 727 CURLEW ROAD DELRAY BCH, FL 00000,			
PD LITTLE, S DEAN 727 CURLEW ROAD DELRAY BCH, FL 00000,			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an address, with all other like empowered.			
SIGNATURE: <u>Deborah G. Little</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		3-14-07 561-279-4727 Date Daytime Phone #	

DEBORAH G. LITTLE