2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2007 08:00 AM
Secretary of State

DOGL	IMFN	T # 62	4591
1 // // //	JIVIIII (N	1 ++ 1.7	

1. Entity Name

MOVIE MEDIA NETWORK, INC.



Principal Place of Business

%DAVID WEISS 1541 BRICKELL AVE., STE. 3405 MIAMI, FL 33129 US Mailing Address

%DAVID WEISS 1541 BRICKELL AVE., STE. 3405 MIAMI, FL 33129 US



DO NOT WRITE IN THIS SPACE

01182007 No Chg-P CR2E034 (11/05)

 FEI Number 	Applied For_
59-1987229	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

WEISS, DAVID 1541 BRICKELL AVE. SUITE 3405 MIAMI, FL 33129

DO NOT WRITE IN THIS SPACE

			*		
	named entity submits this statement for the p ions of registered agent.	urpose of changing its registere	ed office or re	gistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and tille it	applicable. (NOTE: Registered	l Agent signature i	equired when reinstating)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	<u> </u>		A CONTRACT OF THE CONTRACT OF
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEISS, DAVID 1541 BRICKELL AVE., STE. 3405 MIAMI, FL		6- / · · 6- · · · · · · · · · · · · · · · ·		
NAME STREET ADDRESS CITY-ST-ZIP			• • •	72 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	U00000599925 01/25/07-80047-005 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				4.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				1000	
13 I boroby	contifue that the information according to the trie El			11 01 1 11	and the state of t

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: DOVID WEISS, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/07

(305)854-7111

Daytime Phone #