2006 FOR PROFIT CORPORATION

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP_

CITY-ST-7IP-

TITLE

NAME.

Secretary of State ANNUAL REPORT 02-21-2006 90018 040 ***150.00 DOCUMENT # F02000002243 REEL STAR PRODUCTIONS, INC. Principal Place of Business Mailing Address P.O. BOX 1092 P.O. BOX 1092 40020333 OLD ORCHARD BEACH, ME 04064 OLD ORCHARD BEACH, ME 04064 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02022006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 01-0519703 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET, TALLAHASSEE, FL 32301-2525 City Zip Code 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 ---Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FÎLE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD MLE ☐ Detete TITLE ☐ Addition ☐ Change TRUE, KAREN E NAME NAME STREET ADDRESS 29A OLD ORCHARD ROAD STREET ADDRESS CITY-ST-7IP SACO, ME 04072 CITY-ST-ZIP ΤD ☐ Delete TITLE TITLE Change ☐ Addition GORMAN, MAUREEN NAME NAME STREET ADDRESS 74 FORESIDE ROAD STREET ADDRESS CITY-ST-ZIP CUMBERLAND FORESIDE, ME 04110 CITY-ST-ZIP CLRK TITLE Delete TITLE ☐ Change ☐ Addition GREENE, MARTHA E NAME NAME STREET ADDRESS 184 MAIN ST. STREET ADDRESS LEWISTON, ME 04240 CITY ST-712 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE Delete TITLE ☐ Change ■ Addition NAME NAME

FILED Feb 21, 2006 8:00 am

Change

☐ Addition

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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME

Delete

THE MALL MALLER GORMAN
PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Feb 6,06

BRANN & ISAACSON

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February 15, 2006

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED
(7004 0750 0003 0113 2700)

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

RE: 2006 Annual Report - Reel Star Productions, Inc.

Dear Sir/Madam:

Enclosed please find the completed 2006 For Profit Corporation Annual Report for Reel Star Productions, Inc., together with a check in the amount of \$150.00 to cover the filing fee.

Thank you for your attention to this matter. Kindly contact me if you have any questions.

Senda D. Rotutaillo

Linda D. Robitaille

Paralegal

LDR/ldr Enclosures

cc:

Maureen Gorman

Gain Francis