

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001389

FILED
Apr 07, 2005
Secretary of State

Entity Name: BROWN ENTERTAINMENT INCORPORATED

Current Principal Place of Business:

49 NIAGARA STREET, 2ND FL
TORONTO, ONT, CANADA M5V 1C2,

New Principal Place of Business:

49 NIAGARA STREET, 2ND FL
TORONTO, ON M5V 1C2 CA

Current Mailing Address:

49 NIAGARA STREET, 2ND FL
TORONTO, ONT, CANADA M5V 1C2,

New Mailing Address:

49 NIAGARA STREET, 2ND FL
TORONTO, ON M5V 1C2 CA

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TUCKER, I. MICHAEL ESQ
SUNTRUST BANK BLDG.
498 PALM SPRINGS DRIVE, STE. 100
ALTAMONTE SPRINGS, FL 32701 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: CRANOR, WILLIAM
Address: 6 GILES ROAD, CALEDON
City-St-Zip: ONTARIO, CANADA, L0N 1C0,

Title: DT () Delete
Name: WALLACE, CHRISTOPHER J
Address: 136 ROXBOROUGH STREET WEST
City-St-Zip: TORONTO, ONT, CANADA M5R 1V1,

Title: DP () Delete
Name: HENDERSON, PETE
Address: 348 EVCLID AVENUE
City-St-Zip: TORONTO, ONT, CANADA M6J 2K2,

Title: DS () Delete
Name: TAILLON, SYLVAIN
Address: 49 NIAGARA STREET, 2ND FL
City-St-Zip: TORONTO, ONT, CANADA M5V 1C2,

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

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: WILLIAM CRANOR

DVP

04/07/2005

Electronic Signature of Signing Officer or Director

Date