2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# F06000007712

Entity Name: DREAMSCAPE ENTERTAINMENT OF DELAWARE, INC.

Current Principal Place of Business:

755 FEATHERSTONE LANE
LAKE MARY, FL 32746

New Principal Place of Business:

219 ALTAMONTE BAY CLUB CIR., #211
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

755 FEATHERSTONE LANE
LAKE MARY, FL 32746

New Mailing Address:

219 ALTAMONTE BAY CLUB CIR., #211
ALTAMONTE SPRINGS, FL 32701

FEI Number: 58-2633479 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WADE, MICHAEL
755 FEATHERSTONE LANE
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

WADE, MICHAEL
219 ALTAMONTE BAY CLUB CIR., #211
ALTAMONTE SPRINGS, FL 32701 US

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: _____ 03/30/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WADE, MICHAEL
Address: 755 FEATHERSTONE LANE
City-St-Zip: LAKE MARY, FL 32746

Title: S ( ) Delete
Name: WADE, LAURA
Address: 755 FEATHERSTONE LANE
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WADE, MICHAEL
Address: 219 ALTAMONTE BAY CLUB CIR., #211
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S (X) Change ( ) Addition
Name: WADE, LAURA
Address: 219 ALTAMONTE BAY CLUB CIR., #211
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURA WADE S 03/30/2009
Electronic Signature of Signing Officer or Director — Date