2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2007
Secretary of State

DOCUMENT# F93000005918

Entity Name: NORTH AMERICAN MIDWAY ENTERTAINMENT-CATERING SOUTH, INC.

Current Principal Place of Business:

P.O. BOX 6747
JACKSON, MS 39282

New Principal Place of Business:

250 FARROW DR.
JACKSON, MS 39272

Current Mailing Address:

P.O. BOX 6747
JACKSON, MS 39282

New Mailing Address:

FEI Number: 64-0646500 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION
1200 SOUTH PINE ISLAND ROAD,
PLANTATION, FL 33324 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: CP ( ) Delete
Name: WILLIAMS, JAMES M
Address: 250 FARROW DR.
City-St-Zip: JACKSON, MS 39212

Title: VP ( ) Delete
Name: FOREMAN, TERRY P
Address: 250 FARROW DR
City-St-Zip: JACKSON, MS 39212

Title: SEC ( ) Delete
Name: GOLDSTEIN, NED S
Address: 8560 W SUNSET BLVD., 7TH FLOOR
City-St-Zip: WEST HOLLYWOOD, CA 90069

Title: T-AS ( ) Delete
Name: ORGILL, KAY
Address: 8560 W SUNSET BLVD., 7TH FLOOR
City-St-Zip: WEST HOLLYWOOD, CA 90069

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRE (X) Change ( ) Addition
Name: WILLIAMS, JAMES M
Address: 250 FARROW DR.
City-St-Zip: JACKSON, MS 39212

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: SEC ( ) Change (X) Addition
Name: NED, GOLDSTEIN
Address: 8560 W SUNSET BLVD., 7TH FL
City-St-Zip: WEST HOLLYWOOD, CA 90069

I hereby certify that the information supplied with this filing does not qualify for the 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: KAY ORGILL T-AS 01/11/2007

Electronic Signature of Signing Officer or Director — Date