

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002813

FILED
Jan 05, 2009
Secretary of State

Entity Name: VIRGIN ENTERTAINMENT GROUP, INC.

Current Principal Place of Business:

1494 BUENA VISTA DR
LAKE BUENA VISTA, FL 32830 US

New Principal Place of Business:

Current Mailing Address:

5757 WILSHIRE BLVD.
SUITE 300
LOS ANGELES, CA 90036 US

New Mailing Address:

FEI Number: 95-4385291 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
236 E 6TH AVE
TALLAHASSEE, FL 32303 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: CEO () Delete
Name: WRIGHT, SIMON
Address: 5757 WILSHIRE BLVD., SUITE 300
City-St-Zip: LOS ANGELES, CA 90036 US

Title: VPF () Delete
Name: IMMEL, JAMIE
Address: 5757 WILSHIRE BLVD, SUITE 300
City-St-Zip: LOS ANGELES, CA 90036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JAMIE IMMEL

VPF

01/05/2009

Electronic Signature of Signing Officer or Director

Date