2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 04, 2005 08:00 AM Secretary of State

954-44-3109 Daytime Phone #

1. Entity Nan	MENT # G37819 ON PRODUCTIONS, INC.	• • •		Secre	tary or State
Principal Plac	ce of Business	Mailing Address			
3125 NE 48	TH CT	3125 NE 48TH CT			
#121	DOINT EL DODO A	#121			
LIGHTHOUSE POINT, FL 33064 LIGHTHOUSE POINT, FL 33064			14	# FRI(40) 00 DE 1111 1500 1010 140 D 1811 #1861 41	NT 2 8 10 (1 8 18 1) 4 18 11 10 10 10 10 11 10 11
BECKER, 3125 NE 4 #121 LIGHTHOI	6. Name and Address of Current Research CT USE POINT, FL 33064	istered Agent		4. FEI Number 22-5325955 5. Certificate of Status Desired DO NOT WRI IN THIS SPACE ed agent, or both, in the State of Florida.	Applied For Not Applicable \$8.75 Additional Fee Required
SIGNATURE Stgritture, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOWI! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
10.	OFFICERS AND DIF	ECTORS	· · · · · · · · · · · · · · · · · · ·	to the action with the property of the propert	المحالات والمراو ومعاومهم ومعاورة والمراز
TITLE	DP BECKER, ROBERT S.		, ,	The state of the s	
NAME STREET ADDRESS	3125 NE 48TH COURT #121		1		, , , , , , , , , , , , , , , , , , ,
CITY-ST-ZIP	LIGHTHOUSE POINT, FL				
TITLE	LIGHTHOUGHT ONTO, E				Anno <u>C.C. (</u>
NAME				Tia /fia /fi⊊+Qfi	005-014 150.00
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CITY-ST-ZIP				20-40-1-41-41-41-40-10-11-11-11-11-11-11-11-11-11-11-11-11	
12. I hereby certify that the information supplied with this filling does not qualify 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 rue 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 employered 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 flate among a contraction.					
SIGNATURE: 3/31/06 954-44-3109					