

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K61485

Entity Name: MANX PRODUCTIONS INC.

FILED  
Apr 17, 2008  
Secretary of State

## Current Principal Place of Business:

5820 NORTH BAY ROAD  
MIAMI BEACH, FL 33140

## New Principal Place of Business:

## Current Mailing Address:

5820 NORTH BAY ROAD  
MIAMI BEACH, FL 33140 US

## New Mailing Address:

FEI Number: 65-0095564

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADDICOTT, SARI T  
900 NORTH FEDERAL HWY  
201  
HALLANDALE BEACH, FL 33009 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: S ( ) Delete  
Name: ASHBY, RICHARD,  
Address: 5820 NORTH BAY ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: PD ( ) Delete  
Name: GIBB, BARRY  
Address: 5820 NORTH DAY RD  
City-St-Zip: MIAMI, FL 33140

Title: AS ( ) Delete  
Name: GITOMER, ARNOLD,  
Address: TWO FIFTH AVE (15D)  
City-St-Zip: NEW YORK, NY 10011

Title: VPD ( ) Delete  
Name: GIBB, ROBIN  
Address: 5790 NORTH DAY RD  
City-St-Zip: MIAMI BCH, FL 33140

Title: TD ( ) Delete  
Name: GIBB, ADAM  
Address: 8911 BYRON AVE  
City-St-Zip: SURFSIDE, FL 33154

## 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:

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: RICHARD ASHBY

S

04/17/2008

Electronic Signature of Signing Officer or Director

Date