

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # L18825**

1. Entity Name  
**MEDIA STUDIO GROUP, INC.**



Principal Place of Business

**11880 28TH ST. N  
ST. PETERSBURG, FL 33716 US**

Mailing Address

**11880 28TH ST. N  
ST. PETERSBURG, FL 33716 US**

**FILED**

**07 JUL -6 AM 10:10**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**



06202007 No Chg-P CR2E034 (11/05)

4. FEI Number

**59-2968319**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**LITTLE, ANTHONY A  
11880 28TH ST. N  
ST. PETERSBURG, FL 33716**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD LITTLE, ANTHONY A 11880 28TH ST. N ST. PETERSBURG, FL 33716
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**500103452345**  
**05/30/07 01004 001 \$950.00**

**500103452345**  
**07/17/07--01031--001 \*\*50.00**

**DO NOT WRITE  
IN THIS SPACE**

*27/c*

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**6/22/07**

Date

Daytime Phone #