## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2007 08:00 A
Secretary of State

AHHOALIKEI VIII				Socratary of Si			
DOCUMENT # M19246  1. Entity Name DAKOTA STUDIOS, INC.				Secretary of S			
Principal Place of Business  515 NE 96TH ST MIAMI, FL 33138  Mailing Address  515 NE 96TH ST MIAMI, FL 33138							
D	O NOT WRITE	CE	05242007 4, FEI Numb	No Chg-P	CR2E034 (11/05)  Applied For		
		•		59-257 5. Certificate	of Status Desired	Not Applicable  \$8.75 Additional Fee Required	
DAKOTA, IRENE 515 NE 96TH ST MIAMI, FL 33138  8. The above named entity submits this statement for the purpose of changing its register the obligations of registered agent.			DO NOT WRITE IN THIS SPACE red office or registered agent, or both, in the State of Florida. I am familiar with, and accept				
SIGNATURE Signature, typed or printed name of registered agent and bits if applicable (NOTE: Registered Agent				Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00  Due by September 14, 2007  9. Election Campaign Final Trust Fund Contribution.			scing \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.				
TO.  TITLE  NAME  STREET ADDRESS  CATY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CATY ST ZIP	OFFICERS AND DI S DAKOTA, IRENE 515 NE 96TH ST MIAMI, FL 33138 P DAKOTA, MICHAEL 515 NE 96TH ST	RECTORS			U000 06/01/0	00765503 7-80008-012 158.75	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	MIAMI, FL 33138		-		NOT W THIS SF		

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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ny Dakes

124nc G. DAROTA

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