

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 18, 2007
Secretary of State

DOCUMENT# N03000010109

Entity Name: CHOCOLATE STUDIOS INC

Current Principal Place of Business:404 N. ORANGE ST
PALM HARBOR, FL 34683**New Principal Place of Business:****Current Mailing Address:**404 N. ORANGE ST
PALM HARBOR, FL 34683**New Mailing Address:**

FEI Number: 52-2415599

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:SKLAR, AMANDA
213 NORMANDY CIR E
PALM HARBOR, FL 34683 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

OFFICERS AND DIRECTORS:Title: P () Delete
Name: SKLAR, AMANDA
Address: 213 NORMANDY CIR
City-St-Zip: PALM HARBOR, FL 34683Title: VP (X) Delete
Name: SANCHES, DUSTIN
Address: 1320 NEBRASKA AVE B
City-St-Zip: PALM HARBOR, FL 34683Title: TRES () Delete
Name: D'AIELLO, JOHN
Address: 213 NORMANDY CIRCLE EAST # B
City-St-Zip: PALM HARBOR, FL 34683**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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMANDA SKLAR

P

10/18/2007

Electronic Signature of Signing Officer or Director

Date