2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 23, 2006 8:00 am Secretary of State 01-23-2006 90055 047 ****61.25

DOCUMENT # N0400004506 1. Entity Name THE STUDIO @ 620, INC.						01-23-2006 90055 047 ****61.25					
Principal Place of Business 620 FIRST AVE S ST PETERSBURG, FL 33701 Mailing Address 620 FIRST AVE S ST PETERSBURG, FL 33701 ST PETERSBURG, FL 3370				701		(188 28 6	adik diğir sarıı Fair	2 MBEN MBIN BBN4 BI	THE BITTE PROPERTY	 	
2. Principal Place of Business 3. Mai			ailing Address								
Suite, Apt. #, etc. Su		suite, Apt. #, etc.			01102006	Chg-NP	CR2E0	37 (11/05)			
City & State		City	City & State			4. FEI Number 52-2398				oplied For ot Applicable	
Zip	Country	Zip		Country		5. Certificate of	of Status Desire	d 🗆	\$8.75 Add Fee Require		
<u></u>	6. Name and Address of Curren	t Registere	1 Agent			7. Name and	Address of Ne	w Registered	Agent		
ELLIS, GE	ORGE DAVID			Name						}	
ELLIS, GEORGE DAVID 620 FIRST AVE S ST PETERSBURG, FL 33701				Street A	Street Address (P.O. Box Number is Not Acceptable)						
				City				FL	Zip Cod	9	
8. The above the obligat	enamed entity submits this statement tions of registered agent.	for the purpo	se of changing its re	egistered office o	r registere	ed agent, or both	n, in the State o	f Florida. I am	familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered age				 .						
	Signatura, typed or printed name or registered age	nt and title it appl	cable. (NOTE; I	Registered Agent signa	ture required	when reinstating)		DATE		ŀ	
,	•	nt and title if appl	9. Election Camp						k pavable t		
	Filing Fee is \$61.25 Due by May 1, 2006			paign Financing		\$5.00 May Be Added to Fees	F	Make chec lorida Depar	tment of S	tate	
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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 617, 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: