2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005539

Entity Name: THE REGGAEFUSION FOUNDATION, INC

FILED Apr 23, 2007 Secretary of State

_			,				
Current Principal Place of Business:				New Principal Place of Business:			
2565 NW 207TH STREET #128				2565 NW 207TH STREET STE 128			
MIAMI, FL 33056				MIAMI GARDENS, FL 33056			
Current Mailing Address:				New Mailing Address:			
2565 NW 207TH STREET #128 MIAMI, FL 33056				2565 NW 207TH STREET STE 128 MIAMI GARDENS, FL 33056			
FEI Number: 20-5051074 FEI Number Applied For ()			FEI Num	FEI Number Not Applicable () Certificate of Status Desired (X)			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
8875 HIDE STE 300 TAMPA, F	INCORPORAT DEN RIVER PK L 33637 US	WY [*]					
	enamed entity s e of Florida.	submits this statement for the	purpose of	f changing i	ts registered	d office or registered agent, or both,	
SIGNATU	RE:						
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	PD () OGILVIE, DON 2565 NW 207TH MIAMI, FL 330			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () OGILVIE, SEAN 735 SW 148TH DAVIE, FL 333	AVENUE #1705		Title: Name: Address: City-St-Zip:	OGILVIE, SE	5TH TERRACE	
Title: Name: Address: City-St-Zip:	WILLIAMS, JÈŃ 119 WOODLAN	Delete INIFER D DRIVE, PO BOX 11204 APO Y, GRAND CAYMAN, OC		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DANIEL-FIDEL, 4331 NAUTILUS MIAMI BEACH,	DRIVE		Title: Name: Address: City-St-Zip:	DANIEL-FIDI 1830 SOUTH	(X) Change ()Addition EL, FERNANDO I TREASURE DR VILLAGE, FL 33141	
Title: Name:	D () LYN, SANDRA	Delete		Title: Name:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: DON OGILVIE PD 04/23/2007

City-St-Zip: MARKHAM, ONTARIO L6C 2C9, CA