

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 27, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000010685**

1. Entity Name  
**BILLYBRIAN ENTERTAINMENT, INC.**



Principal Place of Business

**2811 SW THIRD AVE  
MIAMI, FL 33129**

Mailing Address

**2811 SW THIRD AVE  
MIAMI, FL 33129**

**DO NOT WRITE IN THIS SPACE**



02222006 No Chg-P CR2E034 (11/05)

4. FEI Number  
**65-0983596**

Applied:  
Not App.

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**EDWARDS, WILLIAM N  
2811 SW THIRD AVE  
MIAMI, FL 33129**

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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 \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be **03/10/06-80010-016 150.00**  
Added to Fees

11000117450536

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PS  
EDWARDS, WILLIAM N  
2811 SW 3RD AVENUE  
MIAMI, FL 33129**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
EDWARDS, ISABEL L  
11951 SW 124 TERRACE  
MIAMI, FL 33186**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.