

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**May 31, 2005 8:00 am**  
**Secretary of State**

05-31-2005 90006 016 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                             |                                                                                                                                                                                                                                    |                                                                                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P00000031715</b><br>1. Entity Name<br><b>IMANI ENTERTAINMENT INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                             |                                                                                                                                                                                                                                    |                                                                                                                                                             |
| Principal Place of Business<br><b>1836 N. CRYSTAL LAKE DR. # 56<br/>LAKELAND, FL 33801</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                             | Mailing Address<br><b>1836 N. CRYSTAL LAKE DR. # 56<br/>LAKELAND, FL 33801</b>                                                                                                                                                     |                                                                                                                                                             |
| 2. Principal Place of Business<br><b>2321 Cheshire Place</b><br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                             | 3. Mailing Address<br><b>2321 Cheshire Place</b><br>Suite, Apt. #, etc.                                                                                                                                                            |                                                                                                                                                             |
| City & State<br><b>Lakeland, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                             | City & State<br><b>Lakeland, FL</b>                                                                                                                                                                                                |                                                                                                                                                             |
| Zip<br><b>33810</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                             | Zip<br><b>33810</b>                                                                                                                                                                                                                |                                                                                                                                                             |
| Country<br><b>U.S.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                             | Country<br><b>U.S.</b>                                                                                                                                                                                                             |                                                                                                                                                             |
| 4. FBI Number<br><b>59-3632238</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                             | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                                                             |                                                                                                                                                             |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                             | <b>\$8.75</b> Additional Fee Required                                                                                                                                                                                              |                                                                                                                                                             |
| 6. Name and Address of Current Registered Agent<br><br><b>BAILEY, HORACE<br/>1836 N CRYSTAL LAKE DRIVE<br/>APT #56<br/>LAKELAND, FL 33801</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                             | 7. Name and Address of New Registered Agent<br>Name <b>HORACE BAILEY</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>1969 Crystal Grove Drive Apt. 136</b><br>City <b>LAKELAND</b> <b>FL</b> Zip Code <b>33801</b> |                                                                                                                                                             |
| 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.<br>SIGNATURE <u><i>Horace Bailey</i></u> <span style="float: right;">DATE _____</span><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>                                                                                                                                                                 |                                                                                                                             |                                                                                                                                                                                                                                    |                                                                                                                                                             |
| <b>FILE NOW!!! FEE IS \$550.00</b><br>Due by September 7, 2005                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                             | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees                                                                                                             |                                                                                                                                                             |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                             | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                                                                                                                                       |                                                                                                                                                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | PD<br>WILLIAMS, DEANDRE L<br>922 OSCEOLA STREET<br>LAKELAND, FL 33801 <input type="checkbox"/> Delete                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                 | PD<br>WILLIAMS, DEANDRE L<br>2321 Cheshire Place<br>Lakeland, FL 33810 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | VD<br>ODOM, TYSON T<br>610 W PONDEROSSA DRIVE<br>LAKELAND, FL 33809 <input checked="" type="checkbox"/> Delete              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                 | VD<br>WILLIAMS, DEANDRE L<br>2321 Cheshire Place<br>Lakeland, FL 33810 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | TD<br>BAILEY, HORACE<br>1836 N CRYSTAL LAKE DRIVE, APT #56<br>LAKELAND, FL 33801 <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                 | TD<br>HORACE BAILEY<br>1969 Crystal Grove Drive Apt. 136<br>LAKELAND, FL 33801 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | SD<br>ODOM, RUSSELL E<br>610 W PONDEROSSA DRIVE<br>LAKELAND, FL 33809 <input type="checkbox"/> Delete                       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete                                                                                             | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete                                                                                             | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                           |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>Deandre Williams</i></u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                             | Date <b>5/24/05</b> <span style="float: right;">(863) 286-4964</span><br><small>Daytime Phone #</small>                                                                                                                            |                                                                                                                                                             |