## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000074022

Entity Name: BUSTIN' LOOSE PRODUCTIONS, INC.

1850 LONG POND DR

LONGWOOD, FL 32779

Address:

City-St-Zip:

FILED Apr 26, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1850 LONG POND DR LONGWOOD, FL 32779 **Current Mailing Address: New Mailing Address:** P.O. BOX 1968 ORLANDO, FL 32802 FEI Number: 59-3671057 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: REECE, RUDOLPH JR 1850 LÓNG POND DR LONGWOOD, FL 32779 US 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition REECE, RUDOLPH JR Name: Name: 1850 LONG POND DR Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: (X) Delete Title: VD Title: () Change () Addition Name: REECE, MARSHA D.M. 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUDOLPH REECE, JR. PD 04/26/2007