

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000080137

Entity Name: B3 DIGITAL STUDIOS, INC.

FILED
Apr 23, 2005
Secretary of State

Current Principal Place of Business:

527 QUEENS MIRROR CIR
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

527 QUEENS MIRROR CIR
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 59-3734657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEMBERGER, JOHN
4853 S ORANGE AVE STE C
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

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:

Title: DCEO () Delete
Name: HUFFORD, WILLIAM M
Address: 527 QUEENS MIRROR CIR
City-St-Zip: CASSELBERRY, FL 32707

Title: DV () Delete
Name: SWANSON, ROBERT
Address: 1605 ISON LN
City-St-Zip: OCOEE, FL 34761

Title: DST () Delete
Name: HUFFORD, COLLEEN S
Address: 527 QUEENS MIRROR CIR
City-St-Zip: CASSELBERRY, FL 32707

Title: DV () Delete
Name: WELLS, BRIAN B
Address: 16845 OMEGA CT
City-St-Zip: MONTEVERDE, FL 34756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: SWANSON, ROBERT
Address: 4113 TALL TREE LANE
City-St-Zip: ORLANDO, FL 32810

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM M HUFFORD

DCEO

04/23/2005

Electronic Signature of Signing Officer or Director

Date