

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000089515

FILED
Apr 08, 2008
Secretary of State

Entity Name: MIXED UP PRODUCTIONS INC.

Current Principal Place of Business:

215 N FEDERAL HWY
DANIA BEACH, FL 33004

New Principal Place of Business:

Current Mailing Address:

215 N FEDERAL HWY
DANIA BEACH, FL 33004

New Mailing Address:

FEI Number: 65-1148258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAURENCE, DAVID L P.A.
215 N FEDERAL HWY
DANIA BEACH, FL 33004 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: P () Delete
Name: BAHAMON, EDDISON
Address: 10337 SW159 COURT
City-St-Zip: MIAMI, FL 33196

Title: V () Delete
Name: MORRIS, KATE
Address: 10337 SW 159 COURT
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BAHAMON, EDISON
Address: 13415 SW 62 STREET, #2
City-St-Zip: MIAMI, FL 33183

Title: V (X) Change () Addition
Name: MORRIS, KATE
Address: 1501 HAVEN CREST DRIVE
City-St-Zip: POWDER SPRINGS, GA 30127

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: KATE MORRIS

V

04/08/2008

Electronic Signature of Signing Officer or Director

Date