

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000121221

FILED  
Mar 22, 2006  
Secretary of State

Entity Name: REAL FILMS, INC.

## Current Principal Place of Business:

5001 HANDCOCK ROAD  
SW RANCHES, FL 33330

## New Principal Place of Business:

212 ASPEN WAY  
DAVIE, FL 33325

## Current Mailing Address:

5001 HANDCOCK ROAD  
SW RANCHES, FL 33330

## New Mailing Address:

212 ASPEN WAY  
DAVIE, FL 33325

FEI Number: 43-1949782

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GASKINS, JACQUELINE M  
5001 HANDCOCK ROAD  
SW RANCHES, FL 33330 US

## Name and Address of New Registered Agent:

CAPONELLI, JACQUELINE M  
212 ASPEN WAY  
DAVIE, FL 33325 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: JACQUELINE M. CAPONELLI

03/22/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GASKINS, JACQUELINE M  
Address: 5001 HANDCOCK ROAD  
City-St-Zip: SW RANCHES, FL 33330

Title: VP ( ) Delete  
Name: CAPONELLI, EDWARD C  
Address: 5001 HANDCOCK ROAD  
City-St-Zip: SW RANCHES, FL 33330

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CAPONELLI, JACQUELINE M  
Address: 212 ASPEN WAY  
City-St-Zip: DAVIE, FL 33325

Title: VP (X) Change ( ) Addition  
Name: CAPONELLI, EDWARD C  
Address: 212 ASPEN WAY  
City-St-Zip: DAVIE, FL 33325

I hereby certify that the information supplied with this filing does not qualify for the 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: JACQUELINE M. CAPONELLI

P

03/22/2006

Electronic Signature of Signing Officer or Director

Date