

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000015574

Entity Name: L.J. PRODUCTIONS TV USA, INC.

FILED
Apr 14, 2007
Secretary of State

Current Principal Place of Business:

872 STANTON DR.
WESTON, FL 33326 US

New Principal Place of Business:

709 SHOTGUN RD
SUNRISE, FL 33326 US

Current Mailing Address:

PO BOX 268075
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 03-0394014 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIMENEZ, LUIS
872 STATON DR.
WESTON, FL 33326 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: PTD () Delete
Name: JIMENEZ, LUIS A
Address: 872 STATION DR.
City-St-Zip: WESTON, FL 33326

Title: SD () Delete
Name: JIMENEZ, LUIS
Address: 872 STATON DR.
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: JIMENEZ, LUIS A
Address: PO BOX 268075
City-St-Zip: WESTON, FL 33326

Title: SD (X) Change () Addition
Name: JIMENEZ, LUIS
Address: PO BOX 268075
City-St-Zip: WESTON, FL 33326

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: LUIS JIMENEZ

PD

04/14/2007

Electronic Signature of Signing Officer or Director

Date