2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000030710

Entity Name: SOURCE ONE PROMOTIONS, INC.

FILED Feb 08, 2005 Secretary of State

| EIILILY NAI | ille: SOURCI | E ONE PROMOTIONS, INC. | | |
|---|---|--------------------------------|--|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | |
| 3913 DELE TAMPA, F | | | | |
| Current Mailing Address: | | | New Mailing Address: | |
| PMB 38 533 S. HO TAMPA, F | WARD AVE # L 33606 | 8 | | |
| FEI Number | : 41-2036357 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and | Address of | Current Registered Agent: | Name and Address of | f New Registered Agent: |
| 3913 DELETAMPA, F | L 33609 U | | purpose of changing its registere | d office or registered agent, or both, |
| SIGNATUI | RE: | | | |
| | Electro | nic Signature of Registered Ag | ent | Date |
| Election Car | mpaign Financir | g Trust Fund Contribution (). | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PTS (MORIARTY, D 3913 DELEON TAMPA, FL 33 | ST. | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | V (DONER, GREG 108 KEY HAVE TAMPA, FL 33 | EN CT | Title: Name: Address: City-St-Zip: | () Change () Addition |

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: DANIEL P MORIARTY PTS 02/08/2005