2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000033984

Title:

Name:

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City-St-Zip:

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ITON, KEITH

4800 SW 14TH CT

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PEMBROKE PINES, FL 33025

NE ADTICT ENTEDTAINMENT INC

FILED Jun 21, 2004 Secretary of State

Entity Name: LIVINGSTONE ARTIST ENTERTAINMENT, INC. **Current Principal Place of Business: New Principal Place of Business:** 9800 S.W. 13TH CT. PEMBROKE PINES, FL 33025 **Current Mailing Address: New Mailing Address:** 9800 S.W. 13TH CT PEMBROKE PINES, FL 33025 FEI Number: 01-0648876 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BENSON, NATE L 9800 S.W. 13TH CT. PEMBROKE PINES, FL 33025 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: **PRFS** (X) Change () Addition BENSON, NATE L Name: Name: BENSON, NATE L 9800 S.W. 13TH CT. 9800 S.W. 13TH CT. Address: Address: City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: PEMBROKE PINES, FL 33025 Title: Title: () Delete () Change () Addition PEARSON, ROBIN Name: Name: 4800 SW 14TH CT Address: Address: PEMBROKE PINES, FL 33025 City-St-Zip: 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: NATE L. BENSON PRES 06/21/2004

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