

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000051070

Entity Name: GROOVYMOVIE, INC.

FILED
Jan 19, 2004
Secretary of State

Current Principal Place of Business:

P.O. BOX 268208
FT LAUDERDALE, FL 333268208

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 268208
FT LAUDERDALE, FL 333268208

New Mailing Address:

FEI Number: 03-0437928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARITZ, NEIL S ESQ
150 E PALMETTO PARK RD STE 750
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

DREIER, NANCY A
PO BOX 268208
FT LAUDERDALE, FL 33326 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: NANCY A DREIER

01/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DREIER, MITCHEL
Address: P.O. BOX 268208
City-St-Zip: FORT LAUDERDALE, FL 33326

Title: VPD () Delete
Name: DREIER, NANCY
Address: P.O. BOX 268208
City-St-Zip: FORT LAUDERDALE, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: NANCY A DREIER

VPD

01/19/2004

Electronic Signature of Signing Officer or Director

Date