## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000059624

Entity Name: SOUNDWAVE PRODUCTIONS & ENTERTAINMENT, INC.

FILED May 03, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3142 ELKRIDGE DRIVE 920 EAST 124TH AVE HOLIDAY, FL 34691 SUITE #F

TAMPA, FL 33612

Current Mailing Address: New Mailing Address:

3142 ELKRIDGE DRIVE 19819 TIMBERBLUFF DRIVE HOLIDAY, FL 34691 LAND O LAKES, FL 34638

FEI Number: 11-3646940 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:

CASLER, RAYMOND A
3142 ELKRIDGE DRIVE
HOLIDAY, FL 34691 US

CASLER, RAYMOND A
19819 TIMBERBLUFF DRIVE
LAND O LAKES, FL 34638 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: 05/03/2008

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: (X) Change ( ) Addition CASLER, JENNIFER L CASLER, JENNIFER L Name: Name: 3142 ELKRIDGE DRIVE Address: 19819 TIMBERBLUFF DRIVE Address: City-St-Zip: HOLIDAY, FL 34691 City-St-Zip: LAND O LAKES, FL 34638

Title: V () Delete Title: V (X) Change () Addition

Name:CASLER, RAYMOND AName:CASLER, RAYMOND AAddress:3142 ELKRIDGE DRIVEAddress:19819 TIMBERBLUFF DRIVECity-St-Zip:HOLIDAY, FL 34691City-St-Zip:LAND O LAKES, FL 34638

I hereby certify that the information supplied with this filing does not qualify 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: RAYMOND A CASLER V 05/03/2008