

# **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000064508

**FILED**  
**Apr 29, 2004**  
**Secretary of State**

**Entity Name:** MIDNIGHT SUN PRODUCTIONS, INC.

**Current Principal Place of Business:**

6208 BEAR CREEK COURT  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

6208 BEAR CREEK COURT  
LAKE WORTH, FL 33467

**New Mailing Address:**

**FEI Number:** 02-0631632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHOLIN, CHRISTIAN N  
505 SOUTH FLAGLER DRIVE  
SUITE 400  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

ATLANTIC FULCRUM, INC.  
5112 ARBOR GLEN CIRCLE  
LAKE WORTH, FL 33463 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: SUVI HYVARINEN

04/29/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FORSBERG, MONICA  
Address: 6208 BEAR CREEK COURT  
City-St-Zip: LAKE WORTH, FL 33467

Title: D ( ) Delete  
Name: ANDERSON, HANS  
Address: 6208 BEAR CREEK COURT  
City-St-Zip: LAKE WORTH, FL 33467

**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: FORSBERG MONICA

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date