

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000092160

FILED  
Mar 21, 2005  
Secretary of State

Entity Name: SLEDGEHAMMER PRODUCTIONS, INC.

## Current Principal Place of Business:

20735 N.E. 8TH COURT  
SUITE 206  
NORTH MIAMI BEACH, FL 33179

## New Principal Place of Business:

## Current Mailing Address:

20735 N.E. 8TH COURT  
SUITE 206  
NORTH MIAMI BEACH, FL 33179

## New Mailing Address:

454 N.E. 210 CIR TER  
SUITE 201  
NORTH MIAMI BEACH, FL 33179

FEI Number: 03-0515267

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SPENCE, MARLON  
20735 N.E. 8TH COURT  
SUITE 206  
NORTH MIAMI BEACH, FL 33179 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution (X).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SPENCE, MARLON  
Address: 20735 N.E. 8TH COURT, SUITE 206  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: O ( ) Delete  
Name: BENDER, FRED  
Address: 29 NE 95 ST  
City-St-Zip: MIAMI SHORES, FL 33138

Title: O ( ) Delete  
Name: HUBERT, JOHN  
Address: 2555 NW 207 ST  
City-St-Zip: OPA LOCKA, FL 33056

Title: O ( ) Delete  
Name: SALNAVE, FIDEL  
Address: 6201 NW 27TH AVE  
City-St-Zip: OPA LOCKA, FL 33056

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MARLON SPENCE

D

03/21/2005

Electronic Signature of Signing Officer or Director

Date