## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000095850

Address: City-St-Zip:

Entity Name: DIDTY DADE ENTEDTAINING

FILED Apr 27, 2005 Secretary of State

**Entity Name:** DIRTY DADE ENTERTAINMENT INC **Current Principal Place of Business: New Principal Place of Business:** 10366 SW 175TH STREET MIAMI, FL 33157 **Current Mailing Address: New Mailing Address:** 10366 SW 175TH STREET MIAMI, FL 33157 FEI Number: 51-0423653 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: DBL FINANCIAL SERVICES CORP 5401 S KIRKMAN ROAD **SUITE #310** ORLANDO, FL 32819 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO ( ) Delete Title: () Change () Addition JOHNSON, CURTIS Name: Name: 10366 SW 175TH STREET Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: COO Title: () Delete (X) Change ( ) Addition Name: HAMILTON, LAVAR Name: HAMITON, LAVAR 10366 SW 175TH STREET 10366 SW 175 STREET Address: Address: MIAMI, FL 33157 MIAMI, FL 33157 City-St-Zip: City-St-Zip: Title: ( ) Delete Title: () Change () Addition CLINCH, TANYA Name: Name: 10366 SW 175TH STREET Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: ( ) Delete Title: () Change () Addition WEEMS, DORIAN Name: Name: Address: 10366 SW 175TH STREET Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete MCCOMBS, CARLOS Name: Name: Address: 10366 SW 175 STREET

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.

City-St-Zip:

MIAMI, FL 33157

SIGNATURE: CURTIS JOHNSON COO 04/27/2005