2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098452

Entity Name: FIRST CLASS PRODUCTIONS INC.

FILED Jun 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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11020 PEMBROKE ROAD 3350 SW 148TH AVE

#110 #243

MIRAMAR, FL 33025 MIRAMAR, FL 33027

Current Mailing Address: New Mailing Address:

11020 PEMBROKE ROAD 18331 PINES BLVD

#243 #259

MIRAMAR, FL 33025 PEMBROKE PINES, FL 33029

FEI Number: 04-3737170 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MORRISON, SONYA I MORRISON, SONYA I 11020 PEMBROKE ROAD 18331 PINES BLVD #259 #243

MIRAMAR, FL 33025 US PEMBROKE PINES, FL 33029 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: 06/05/2007

> 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

MORRISON, SONYA I MORRISON, SONYA I Name: Name: 11020 PEMBROKE ROAD #243 Address: 18331 PINES BLVD #259 Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: PEMBROKE PINES, FL 33029

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

MORRISON, DANNY Name: MORRISON, DANNY Name: 11020 PEMBROKE ROAD #243 18331 PINES BLVD #259 Address: Address: MIRAMAR, FL 33025 PEMBROKE PINES, FL 33029 City-St-Zip: City-St-Zip:

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

WEST, CAROLYN Name: WEST, CAROLYN Name: 11020 PEMBROKE ROAD #243 18331 PINES BLVD #259 Address Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: PEMBROKE PINES, FL 33029

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.

Ρ SIGNATURE: SONYA I. MORRISON 06/05/2007