2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2007
Secretary of State

DOCUMENT# P02000104648

Entity Name: UNDERCOVER RECORDS, INC.

Current Principal Place of Business:

12342 RALEIGH RIDGE DR. S.
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

12342 RALEIGH RIDGE DR. S.
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 47-0892302 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERMAN, CAROLYN ESQ.
830 S. THIRD ST., #104
JACKSONVILLE BCH, FL 32250 US

Name and Address of New Registered Agent:

DAVIS, NELSON J SR
12342 RALEIGH RIDGE DRIVE S
JACKSONVILLE, FL 32225 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: NELSON J DAVIS 05/10/2007
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:

Title: DP ( ) Delete
Name: DAVIS, NELSON SR.
Address: 12342 RALEIGH RIDGE DR. S.
City-St-Zip: JACKSONVILLE, FL 32225

Title: DVP ( ) Delete
Name: DAVIS, NELSON JR.
Address: 12342 RALEIGH RIDGE DR. S.
City-St-Zip: JACKSONVILLE, FL 32225

Title: DVP ( ) Delete
Name: MCCLOUD, PAUL
Address: 12342 RALEIGH RIDGE DR. S.
City-St-Zip: JACKSONVILLE, FL 32225

Title: DVP ( ) Delete
Name: WHITE, BOBBY
Address: 12342 RALEIGH RIDGE DR. S
City-St-Zip: JACKSONVILLE, FL 32225

Title: DVP ( ) Delete
Name: MCMULLEN, OTAVIOUS
Address: 12342 RALEIGH RIDGE DR. S.
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: DAVIS, NELSON J SR.
Address: 12342 RALEIGH RIDGE DR. S.
City-St-Zip: JACKSONVILLE, FL 32225

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 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: NELSON J. DAVIS SR. PRES 05/10/2007
Electronic Signature of Signing Officer or Director Date