## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**SIGNATURE:** 

## Apr 13, 2007 08:00 A Secretary of State **DOCUMENT # P03000002080** DOUBLE ACTION ENTERTAINMENT INC. Principal Place of Business Mailing Address PO BOX 170143 PO BOX 170143 MIAMI, FL 33017 MIAMI, FL 33017 No Chg-P CR2E034 (11/05) 03132007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 75-3107988 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FLEMING, AHMAD DO NOT WRITE 2553 CHATEAU LN UNIT B TALLAHASSEE, FL 32311 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE FLEMING, AHMAD NAME STREET ADDRESS 2553 CHATEAU LANE UNIT B CITY-ST-ZIP TALLAHASSEE, FL 32311 VPT TITLE MANDRELL, RAYMOND NAME U00000703948 04/20/07-80161-004 150.00 STREET ADDRESS 1955 NW 192 TERR CITY-ST-ZIP MAIMI, FL 33056 NAME MOLTIMORE, NICOLE STREET ADDRESS 2428 JIM LEE ROAD DO NOT WRITE CITY-ST-ZIP TALLAHASSEE, FL 32301 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NG OFFICER OR DIRECTOR

**FILED**