

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 08, 2006 08:00 A
Secretary of State

DOCUMENT # P03000016001		
1. Entity Name BROTHERS MULTIMEDIA INCORPORATED		
Principal Place of Business 4516 OSPREY LANDING NICEVILLE, FL 32578		Mailing Address 4516 OSPREY LANDING NICEVILLE, FL 32578
DO NOT WRITE IN THIS SPACE		
		05122006 No Chg-P CR2E034 (11/05)
4. FEI Number 59-3756904		Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent ABBOTT, ZENDA 4516 OSPREY LANDING NICEVILLE, FL 32578		DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>		
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ABBOTT, ZENDA C 4516 OSPREY LANDING NICEVILLE, FL 32578	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ABBOTT, MICHAEL E 4516 OSPREY LANDING NICEVILLE, FL 32578	
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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.		
SIGNATURE: <u>Zenda Abbott</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>5/11/06</u> <small>Date Daytime Phone #</small>