2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State ANNUAL REPORT **DOCUMENT # P03000082774** 03-14-2005 90096 013 ***158.75 WADABO ENTERTAINMENT, INC. Mailing Address Principal Place of Business 3601 TURTLE RUN BLVD 3601 TURTLE RUN BLVD 50025338 APT 521 APT 521 GREENWAY, VA 22067 GREENWAY, VA 22067 2. Principal Place of Business 3601 Turtle Run Blvd. 3. Mailing Address 3601 Turtle Run Blvd Suite, Apt. #. etc. Suite, Apt. #, etc. 02222005 Chg-P CR2E034 (10/03) Apt. 521 Apt. 521 City & State Coral Springs, FL Applied For City & State Coral Springs, FL 4 FEI Number 20-0126206 Not Applicable Zio -\$8.75 Additional - - -5. Certificate of Status Desired 33067-4250 33067-4250 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BONAPARTE, WAYNE D Street Address (P.O. Box Number is Not Acceptable) 3601 TURTLE RUN BLVD ATP 521 POMPANO BEACH, FL 33067 ^{zig} 3067-4250 CORAL SPRINGS, 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. 02/22/05 Wayne D. Bonaparte, SIGNATURE. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable, DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution, Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE PD TITLE Change ☐ Addition ☐ Delete BONAPARTE, WAYNE D. BONAPARTE, WAYNE D NAME HAME STREET ADDRESS 3601 TURTLE RUN BLVD, APT, 521 STRFET ADDRESS 3601 Turtle Run Blvd. Apt. 521 OORAL SPRINGS, FL 33067-4250 CITY-ST-ZIP POMPANO BEACH, FL 33067 CDY-ST-7IP TITLE ☐ Addition Delete TITLE STD NAME KREMPA-BONAPARTE, CYNTHIA A MAME KREMPA-BONAPARTE, CYNTHIA A STREET ADDRESS 3601 TURTLE RUN BLVD. APT, 521 STREET ADDRESS 3601 Turtle Run Blvd. Apt. 521 POMPANO BEACH, FL 33067 CITY-ST-ZIP CITY+ST-ZIP CORAL SPRINGS, FL 33067-4250 Change TITLE TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-ST-ZIP TITLE ☐ Delete me ☐ Change Addition HAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this roport 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 attaching with an address, with all other like empowered.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wayne D. Bonaparte, P/D

Date

02/22/05

Daytime Phone #

FILED Mar 14, 2005 8:00 am