

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000098757

Entity Name: P.H.A.R.M STUDIO CORP.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

134 NE 83 STREET
MIAMI, FL 33147 US

New Principal Place of Business:

Current Mailing Address:

134 NE 83 STREET
MIAMI, FL 33147 US

New Mailing Address:

FEI Number: 20-0212047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUBIAN TAX CONSULTANT
16300 NE 19 AVE.
SUITE 215
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PIERRE, BARRY
Address: 134 NE 83 STREET
City-St-Zip: MIAMI, FL 33138 US

Title: VP (X) Delete
Name: PIERRE, HENRY
Address: 17120 NE 4 PLACE
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: TREA () Delete
Name: BELIDOR, ARMOS
Address: 13350 NW 10 AVENUE
City-St-Zip: NORTH MIAMI, FL 33168 US

Title: SEC () Delete
Name: SENAT, RABSON
Address: 925 NW 134 STREET
City-St-Zip: NORTH MIAMI, FL 33168 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: BARRY PIERRE

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date