2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000123302

Entity Name: MILAN PRODUCTIONS, INC.

FILED Jan 25, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
4699 NORTH STATE ROAD 7, SUITE J1 TAMARAC, FL 33319 US						
Current Mailing Address:			New Mailir	New Mailing Address:		
4699 NORTH STATE ROAD 7, SUITE J1 TAMARAC, FL 33319 US						
FEI Number:	56-2409870	FEI Number Applied For ()	El Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered					w Registered Agent:	
MARSHALL, KEVIN 4699 NORTH STATE ROAD 7 J1 TAMARAC, FL 33319 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:						
Electronic Signature of Registered Agent Date						
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS	AND DIRE	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	GLORIA MAR	() Delete ISHALL/ VP, OF OPPERATIONS STATE ROAD 7, SUITE J1 L 33319 US	Title: Name: Address: City-St-Zip:	KEVIN MARSHAL	Change () Addition .L/ DIR, OF OPPERATIONS ATE ROAD 7, SUITE J1 3319 US	
Title: Name: Address: City-St-Zip:	NORMAN LIN 4699 NORTH	() Delete DO/ DIRECT, OR OF DEVELOPM E NT STATE ROAD 7, SUITE J1 ERDALE, FL 33319 US	Title: Name: Address: City-St-Zip:	CLIFTON JOSEF 4699 NORTH ST	Change ()Addition H/ VP, ATE ROAD 7, SUITE J1 ALE, FL 33319 US	
Title: Name: Address: City-St-Zip:	KEVIN MARS	() Delete HALL/ DIRE, CTOR OF OPPERA T IONS STATE ROAD 7, SUITE J1 L 33319 US	Title: Name: Address: City-St-Zip:	JUNIA SAINTIL/ \	ATE ROAD 7, SUITE J1	
Title: Name: Address: City-St-Zip:	PETER MARS	X) Delete SHALL/DIREC, TOR STATE ROAD 7, SUITE J1 L 33319 US	Title: Name: Address: City-St-Zip:	() (Change ()Addition	
Title: Name: Address:	PIERRE HO-	X) Delete SANG/ ASST, DIR OF DEVELO P MENT STATE ROAD 7, SUITE J1	Title: Name: Address:	()(Change () Addition	

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.

City-St-Zip:

SIGNATURE: KEVIN MARSHALL P 01/25/2008

TAMARAC, FL 33319 US

City-St-Zip: