2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125822

Entity Name: THE VAULT STUDIOS INC

FILED Jun 28, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1995 N.E. 150TH STREET STE 104 NORTH MIAMI, FL 33181

Current Mailing Address: New Mailing Address:

1995 N.E. 150TH STREET STE 104 NORTH MIAMI, FL 33181

FEI Number: 35-2220049 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SEAY, RAYMOND F II COLLINS, JOSEPH B 87 N.É. 156TH STREET 1995 N. E. 150ST STE 104 MIAMI, FL 33162 MIAMI, FL 33181

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: JOSEPH BERNARD COLLINS 06/28/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SEAY, RAYMOND F II SEAY, RAYMOND F II Name: Name:

87 N.E. 156TH STREET 87 N.E. 156TH STREET Address: Address: City-St-Zip: MIAMI, FL 33162 City-St-Zip: MIAMI, FL 33162 US

Title: Title: PD () Delete (X) Change () Addition

SEAY, CHRISTY LYNN Name: Name: COLLINS, JOSEPH B 87 N.E. 156TH STREET 1995 N.E. 150ST STE 104 Address: Address: MIAMI, FL 33162 NORTH MIAMI, FL 33181 US City-St-Zip: City-St-Zip:

() Delete Title: Title: VD (X) Change () Addition COLLINS, JOSEPH B TAMICA, COLLINS M Name: Name:

1995 NE 150TH ST STE 104 2418 N.W. 101 ST Address: Address: City-St-Zip: MIAMI, FL 33181 City-St-Zip: MIAMI, FL 33147 US

Title: (X) Delete Title: () Change () Addition

SEAY, RAYMOND F I Name: Address: 9850 S.W. 154TH AVENUE Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip:

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.

SIGNATURE: JOSEPH B. COLLINS PD 06/28/2007