

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141924

FILED
Jan 24, 2006
Secretary of State

Entity Name: KNIGHT PRODUCTIONS, INC.

Current Principal Place of Business:

3133 NW 108TH TERRACE
SUNRISE, FL 33321

New Principal Place of Business:

Current Mailing Address:

3133 NW 108TH TERRACE
SUNRISE, FL 33321

New Mailing Address:

FEI Number: 20-0396362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASS, DANIEL G
1001 N.W. 50TH STREET
SUITE 204
SUNRISE, FL 33351 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: PD () Delete
Name: KNIGHT, OWEN
Address: 3133 NW 108TH TERRACE
City-St-Zip: SUNRISE, FL 33351

Title: VD () Delete
Name: KNIGHT, ANA
Address: 3133 NW 108TH TERRACE
City-St-Zip: SUNRISE, FL 33351

Title: S () Delete
Name: KNIGHT, OWEN
Address: 3133 NW 108TH TERRACE
City-St-Zip: SUNRISE, FL 33351

Title: T () Delete
Name: KNIGHT, OWEN
Address: 3133 NW 108TH TERRACE
City-St-Zip: SUNRISE, FL 33351

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 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: OWEN KNIGHT

PD

01/24/2006

Electronic Signature of Signing Officer or Director

Date