## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000005986

FILED Mar 07, 2006 Secretary of State

Entity Name: LION VIBES RECORDS PRODUCTION INC.	
Current Principal Place of Business:	New Principal Place of Business:
149 S ATLANTIC DR BOYNTON BEACH, FL 33435	
Current Mailing Address:	New Mailing Address:
149 S ATLANTIC DR BOYNTON BEACH, FL 33435	
FEI Number: 13-4272087 FEI Number Applied For() FEI Nu	mber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
ANDERSON, NEVILLE 149 S ATLANTIC DR BOYNTON BEACH, FL 33435 US	
The above named entity submits this statement for the purpose in the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: D ( ) Delete	Title: D (V) Change ( ) Addition

Title:

Title: ( ) Delete Title: (X) Change ( ) Addition FRANKSON, DEANANDY FRANKSON, DEANANDY L Name: Name: 149 S ATLANTIC DR 149 S ATLANTIC DR Address: Address: City-St-Zip: BOYNTON BEACH, FL 33435 City-St-Zip: BOYNTON BEACH, FL 33435 Title: () Delete Title: (X) Change ( ) Addition FRANKSON, JEFETH FRANKSON, JEFETH L Name: Name: Address: 149 S ATLANTIC DR Address: 149 S ATLANTIC DR BOYNTON BEACH, FL 33435 BOYNTON BEACH, FL 33435 City-St-Zip: City-St-Zip:

Title: (X) Change ( ) Addition ( ) Delete Name: FRANKSON, PETEANN Name: FRANKSON, PETEANN D 149 S ATLANTIC DR Address: 149 S ATLANTIC DR

Address: City-St-Zip: BOYNTON BEACH, FL 33435 City-St-Zip: BOYNTON BEACH, FL 33435

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: DEANANDY FRANKSON 03/07/2006 D