

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000015229

Entity Name: SPECIAL FX STUDIOS INC

FILED
Jan 31, 2007
Secretary of State

Current Principal Place of Business:

68 OCEANVIEW AVENUE
PONCE INLET, FL 32127

New Principal Place of Business:

1901 MASON AVENUE
SUITE 106
DAYTONA BEACH, FL 32117

Current Mailing Address:

68 OCEANVIEW AVENUE
PONCE INLET, FL 32127

New Mailing Address:

1901 MASON AVENUE
SUITE 106
DAYTONA BEACH, FL 32117

FEI Number: 20-1856823

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALTHOUSE, TERI
68 OCEANVIEW AVENUE
PONCE INLET, FL 32127 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: DPS () Delete
Name: ALTHOUSE, TERI
Address: 68 OCEANVIEW AVENUE
City-St-Zip: PONCE INLET, FL 32127

Title: VP () Delete
Name: MATTSON, ROXANA
Address: 68 OCEANVIEW AVENUE
City-St-Zip: PONCE INLET, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: TERI ALTHOUSE

DPS

01/31/2007

Electronic Signature of Signing Officer or Director

Date