2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000075777

Entity Name: FALCON FILMS, INC.

FILED Sep 04, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 555 NE 15TH ST STE 7712 MIAMI, FL 33132 **Current Mailing Address: New Mailing Address:** 555 NE 15TH ST STE 7712 MIAMI, FL 33132 FEI Number: 55-0867021 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: BOSSE, CARL 555 NE 15TH ST STE 7712 MIAMI, FL 33132 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LOUIS, JACQUES C Name: Name: 555 NE 15TH ST STE 7712 Address: Address: City-St-Zip: MIAMI, FL 33132 City-St-Zip: Title: DSV Title: () Delete () Change () Addition Name: LEADER, KEN Name: 555 NE 15TH ST STE 7712 Address: Address: MIAMI, FL 33132 City-St-Zip: City-St-Zip: Title: Title: CST () Delete () Change () Addition BOSSE, CARL Name: Name: 555 NE 15TH ST STE 7712 Address: Address: City-St-Zip: MIAMI, FL 33132 City-St-Zip: Title: () Delete Title: () Change () Addition CASTILLO, TONY Name: Name: Address: 555 NE 15TH ST STE 7712 Address: City-St-Zip: MIAMI, FL 33132 City-St-Zip: Title: Title: () Delete () Change () Addition LECOUNT, ALEX Name: Name: 555 NE 15TH ST STE 7712 Address: Address: City-St-Zip: MIAMI, FL 33132 City-St-Zip: Title: (X) Delete Title: () Change () Addition AIMES, STANLEY Name: Name: 10325 NW 7 AVE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33150

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: CARL BOSSE CST 09/04/2006