

2005 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

05 AUG 29 PM 3:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08032005 Chg-P CR2E034 (10/03)

DOCUMENT # P04000119833 1. Entity Name WEEDOO ENTERTAINMENT, INC.					
Principal Place of Business 5330 SW 28TH STREET HOLLYWOOD, FL 33023			Mailing Address 5330 SW 28TH STREET HOLLYWOOD, FL 33023		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <div style="font-size: 1.2em; font-family: monospace;">75-3170716</div> <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BROWN, DARNELL 5330 SW 28TH STREET HOLLYWOOD, FL 33023			Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BROWN, DARNELL	NAME	<div style="font-size: 1.5em; font-family: monospace; opacity: 0.5;">900059285859</div>		
STREET ADDRESS	5330 SW 28TH STREET	STREET ADDRESS	<div style="font-size: 1.2em; font-family: monospace; opacity: 0.5;">09/07/05--01023--014</div>		
CITY-ST-ZIP	HOLLYWOOD, FL 33023	CITY-ST-ZIP	<div style="font-size: 1.2em; font-family: monospace; opacity: 0.5;">159.07</div>		
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ROBERTS, TAVARIS	NAME			
STREET ADDRESS	5330 SW 28TH STREET	STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD, FL 33023	CITY-ST-ZIP			
TITLE	T <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	NORENA, ALEXANDER	NAME			
STREET ADDRESS	5330 SW 28TH STREET	STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD, FL 33023	CITY-ST-ZIP			
TITLE	S <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PATTERSON, H. NICHOLE	NAME			
STREET ADDRESS	5330 SW 28TH STREET	STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD, FL 33023	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Darnell Brown</i> (P) Darnell Brown		8/24/2005		754-366-7413	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	