2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000119833

Entity Name: WEEDOO ENTERTAINMENT, INC.

5330 SW 28TH STREET

HOLLYWOOD, FL 33023 US

Address:

City-St-Zip:

FILED Apr 30, 2009 Secretary of State

Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:		
	28TH STREE1 DOD, FL 3302					
Current N	lailing Addre	ss:	New Mailing Address:			
	28TH STREE1 DOD, FL 3302					
FEI Number	: 75-3170716	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired	l()
Name and	d Address of (Current Registered Agent:	Name and	Address of	New Registered Agent:	
	DARNELL 28TH STREET DOD, FL 3302					
	e named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, o	or both,
SIGNATUI						
		nic Signature of Registered Ag	ent		Date	
Election Cal	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	P (BROWN, DARI 5330 SW 28TH HOLLYWOOD	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ALEXANDER, 5410 LYONS F) Delete NORENA A ROAD APT. 202 EEK, FL 33073 US	Title: Name: Address: City-St-Zip:	ALEXANDER, 5410 LYONS	X) Change () Addition NORENA A ROAD APT. 202 REEK, FL 33073 US	
Title: Name: Address: City-St-Zip:	T (BROWN, TAVA 5330 SW 28TH HOLLYWOOD	STREET	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name:	S (BROWN, DARI) Delete NELL	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: ALEXANDER A. NORENA VP 04/30/2009