

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000169019

FILED
Apr 27, 2006
Secretary of State

Entity Name: MAJESTIC MEDIA & PUBLISHING COMPANY, INC.

Current Principal Place of Business:

P.O. BOX 10887
METAIRIE, LA 70181 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10887
METAIRIE, LA 70181 US

New Mailing Address:

FEI Number: 55-0891705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, DEBORAH L.
400 VILLA GRANDE AVE. SOUTH
SAINT PETERSBURG, FL 33707 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: PVPS () Delete
Name: WILLIAMS, DEBORAH
Address: P.O. BOX 10887
City-St-Zip: METAIRIE, LA 70181 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPT (X) Change () Addition
Name: WILLIAMS, DEBORAH L
Address: P.O. BOX 10887
City-St-Zip: METAIRIE, LA 70181 US

Title: S () Change (X) Addition
Name: WILLIAMS, CARROL S
Address: POST OFFICE BOX 10887
City-St-Zip: METAIRIE, LA 70181 US

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: DEBORAH L WILLIAMS

PVPT

04/27/2006

Electronic Signature of Signing Officer or Director

Date