

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000015518

FILED
Apr 17, 2008
Secretary of State

Entity Name: MASS CONFUSION PRODUCTIONS, INC.

Current Principal Place of Business:

2600 ISLAND BLVD STE 1906
AVENTURA, FL 33160

New Principal Place of Business:

Current Mailing Address:

2528 CALUMET DRIVE
VIRGINIA BEACH, VA 23456

New Mailing Address:

FEI Number: 54-1919864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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: P () Delete
Name: ELLIOTT, MELISSA
Address: 2600 ISLAND BLVD., SUITE 1906
City-St-Zip: AVENTURA, FL 33160

Title: SEC () Delete
Name: ELLIOTT, MELISSA
Address: 2600 ISLAND BLVD STE 1906
City-St-Zip: AVENTURA, FL 33160

Title: DIR () Delete
Name: ELLIOTT, MELISSA
Address: 2600 ISLAND BLVD STE 1906
City-St-Zip: AVENTURA, FL 33160

Title: DIR () Delete
Name: ELLIOTT, MELINDA
Address: 2528 CALUMET DRIVE
City-St-Zip: VIRGINIA BEACH, VA 23456

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: MELINDA ELLIOTT

DIR

04/17/2008

Electronic Signature of Signing Officer or Director

Date