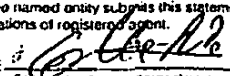
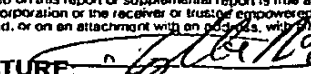


FILED
Mar 13, 2006 8:00 am
Secretary of State

02-16-2006 90032 029 ***150.00

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

2/1

DOCUMENT # P05000042341			
1. Entity Name GKM PRODUCTIONS, INC.			
Principal Place of Business 15127 SW 32 STREET MIAMI, FL 33185		Mailing Address 15127 SW 32 STREET MIAMI, FL 33185	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. EEI Number 20-2508966		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WHAT A REFUND INC 8200 W 33 AVE 15 HIALEAH, FL 33018		7. Name and Address of New Registered Agent Name: GILBERTO RODRIGUEZ Street Address (P.O. Box Number is Not Acceptable) 15127 SW 32 ST City: MIAMI FL Zip Code: 33185	
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:  Signature, typed or printed name of registered agent and date if applicable NOTE: Registered Agent signature required when renouncing DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P RODRIGUEZ, GILBERTO 15127 SW 32 STREET MIAMI, FL 33185 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP RODRIGUEZ, MARITZA 15127 SW 32 STREET MIAMI, FL 33185 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 authority like empowered.			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 2-14-06 Daytime Phone #	

ATTACHMENT

666004826
P05000042341

1st Quarter	945
2nd Quarter	1120
3rd Quarter	990-T
4th Quarter	990- PF
	1042

b2

FOR BANK USE IN MICR ENCODING

Mark the "X" in this box only if there is a change to Employer Identification Number (EIN) or Name.

See instructions on page 1.

EIN 20-2508966 171912

GKM PRODUCTIONS INC
 15127 SW 32 ST
 MIAMI, FL 33145-3990

BANK NAME/
 DATE STAMP

07 3 Telephone number ()

Federal Tax Deposit Coupon
 Form 8109 (Rev. 12-2002)

Date _____
 Check Number _____
 Type of Tax _____
 Tax Period _____

ATTACHMENT

66004826



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 20, 2006.

GKM PRODUCTIONS, INC.
15127 SW 32 STREET
MIAMI, FL 33185

Subject: **GKM PRODUCTIONS, INC.**

Reference Number: **P05000042341**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For ~~FEI number~~ assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH
ANNUAL REPORTS SECTION