

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 11, 2006 8:00 am
Secretary of State

09-11-2006 90005 046 ***150.00

DOCUMENT # P05000043974					
1. Entity Name MUNCHEEZ ENTERTAINMENT, INC.					
Principal Place of Business 1580 SAWGRASS CORPORATE PKWY SUITE 130 SUNRISE, FL 33323			Mailing Address 1580 SAWGRASS CORPORATE PKWY SUITE 130 SUNRISE, FL 33323		
2. Principal Place of Business 2141 N. UNIVERSITY DR. Suite, Apt. #, etc. #114 City & State CORAL SPRINGS, FL Zip 33071 Country USA		3. Mailing Address 2141 N. UNIVERSITY DR. Suite, Apt. #, etc. #114 City & State CORAL SPRINGS, FL Zip 33071 Country USA			
08222006 Chg-P CR2E034 (11/05)		4. FEI Number 52-2455613		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 SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2006		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 NAME STREET ADDRESS CITY-ST-ZIP	PD YOUNG, DANNY 2314 NW 98TH TERR CORAL SPRINGS, FL 33065	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD YOUNG, MONICA 2314 NW 98TH TERR CORAL SPRINGS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD YOUNG, MONICA 2314 NW 98TH TERR CORAL SPRINGS, FL 33065	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GIATROUAKIS, GARY 1501 WOODHOLD OAKS DR APOPKA 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 all other like empowered.					
SIGNATURE:			DANNY YOUNG		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			8/22/06 954)895-4122		