2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046251

Entity Name: STUDIO 13, INC.

FILED Jul 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2809 E. CERVANTES STREET 1602 N 9 TH AVENUE PENSACOLA, FL 32503 PENSACOLA, FL 32503

Current Mailing Address: New Mailing Address:

2809 E. CERVANTES STREET 1602 N 9 TH AVENUE PENSACOLA, FL 32503 PENSACOLA, FL 32503

FEI Number: 52-2457860 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORRIS, TODD W
2809 E. CERVANTES STREET
PENSACOLA, FL 32503 US

MORRIS, TODD W
1602 N 9TH AVENUE
PENSACOLA, FL 32503 US

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: 07/22/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: PSD (X) Change () Addition

 Name:
 MORRIS, TODD W
 Name:
 MORRIS, TODD W

 Address:
 2809 E. CERVANTES STREET
 Address:
 1602 N 9TH AVENUE

 City-St-Zip:
 PENSACOLA, FL 32503
 City-St-Zip:
 PENSACOLA, FL 32503

() Delete Title: Title: (X) Change () Addition DARLING-MORRIS, LAURA A DARLING-MORRIS, LAURA A Name: Name: 2809 E. CERVANTES STREET Address: 1602 N 9TH AVENUE Address: PENSACOLA, FL 32503 PENSACOLA, FL 32503 City-St-Zip: 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: TODD MORRIS PSD 07/22/2008