2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# P05000071127

Entity Name: BLUE RIDER STUDIOS INC.

Current Principal Place of Business:

860 NORTH ORANGE AVE.
#202
ORLANDO, FL 32801

New Principal Place of Business:

MARION THEATRE 50 SOUTH MAGNOLIA AVE
OCALA, FL 34474

Current Mailing Address:

860 NORTH ORANGE AVE.
#202
ORLANDO, FL 32801

New Mailing Address:

MARION THEATRE 50 SOUTH MAGNOILA AVE
OCALA, FL 34474

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ASTROM, MARK
860 NORTH ORANGE AVE.
#202
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

ASTROM, MARK
MARION THEATRE 50 SOUTH MAGNOLIA AVE
OCALA, FL 34474 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: MARK ASTROM 04/28/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ASTROM, MARK
Address: 860 NORTH ORANGE AVE. #202
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ASTROM, MARK
Address: MARION THEATRE 50 SOUTH MAGNOLIA AVE
City-St-Zip: OCALA, FL 34474

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: MARK ASTROM P 04/28/2006
Electronic Signature of Signing Officer or Director Date