2007 FOR PROFIT CORPORATION

FILED May 01, 2007 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # P05000150628 DAWSON DANCE ACADEMY, INC. Principal Place of Business v. Mailing Address 4832 SKY BLUE DRÎVE **4832 SKY BLUE DRIVE** LUTZ, FL 33558 LUTZ, FL 33558 04232007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3775770 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DAWSON-WAZ, JENNIFER A DO NOT WRITE 4832 SKY BLUE DRIVE LUTZ, FL 33558 IN THIS SPACE Specifical profits of 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE --*-*U00000750819-9. Election Campaign Financing \$5:00 May Be FILE NOW!!! FEE IS \$150.00 05/18/07-80078-003 150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE DAWSON-WAZ, JENNIFER A NAME STREET ADDRESS 4832 SKY BLUE DRIVE CITY-ST-ZIP LUTZ, FL 33558 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE 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 trusfee 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP