2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000016568

Entity Name: SPICE ENTERPRISES, INC.

FILED Apr 29, 2008 Secretary of State

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

415 METZ LANE KISSIMMEE, FL 34759

Current Mailing Address: New Mailing Address:

PO BOX 421315 KISSIMMEE, FL 34742

FEI Number: 20-4283382 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:

HINCKSON, DIANNE
415 METZ LANE
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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: 04/29/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: HINCKSON, DIANNE Name: HINCKSON, DIANNE

Address: 415 METZ LANE Address: 315 DOLPHIN WAY
City-St-Zip: KISSIMMEE, FL 34759 City-St-Zip: KISSIMMEE, FL 34759

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

 Name:
 HINCKSON, DONNA
 Name:
 HINCKSON, DONNA

 Address:
 415 METZ LANE
 Address:
 315 DOLPHIN WAY

 City-St-Zip:
 KISSIMMEE, FL 34759
 City-St-Zip:
 KISSIMMEE, FL 34759

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

 Name:
 MITCHELL, WAYNE
 Name:
 MITCHELL, WAYNE

 Address:
 415 METZ LANE
 Address:
 315 DOLPHIN WAY

 City-St-Zip:
 KISSIMMEE, FL 34759
 City-St-Zip:
 KISSIMMEE, FL 34759

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

 Name:
 FORRESTER, SEAN
 Name:
 FORRESTER, SEAN

 Address:
 415 METZ LANE
 Address:
 315 DOLPHIN WAY

 City-St-Zip:
 KISSIMMEE, FL 34759
 City-St-Zip:
 KISSIMMEE, FL 34759

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: DIANNE HINCKSON P 04/29/2008