


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 17, 2008 8:00 am
Secretary of State

06-17-2008 90002 007 ***150.00

DOCUMENT # P06000032262	
1. Entity Name LIKWID PRODUCTIONS INC.	

Principal Place of Business 503 W DAMPIER ST INVERNESS, FL 34450	Mailing Address 503 W DAMPIER ST INVERNESS, FL 34450
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DO NOT WRITE IN THIS SPACE

401000001



06122008 No Chg-P CR2E034 (11/05)

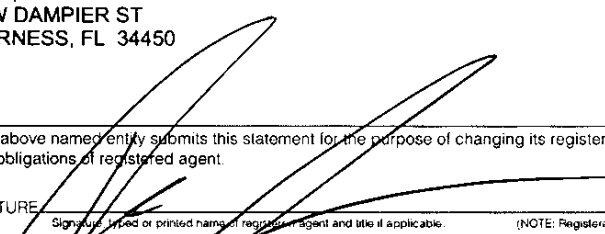
4. FEI Number 20-4400593	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**SMITH, CHRISTOPHER L
503 W DAMPIER ST
INVERNESS, FL 34450**

**DO NOT WRITE
IN THIS SPACE**

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: **6-12-08**

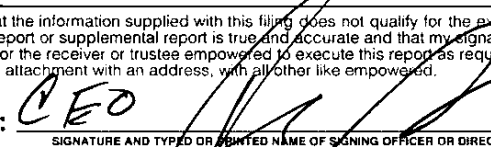
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE CEO	NAME SMITH, CHRISTOPHER L
STREET ADDRESS 503 W DAMPIER ST	CITY-ST-ZIP INVERNESS, FL 34450
TITLE CFO	NAME MARGUERITE, SMITH R
STREET ADDRESS 503 W. DAMPIER ST.	CITY-ST-ZIP INVERNESS, FL 34450
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE: **6-12-08** Daytime Phone #: **888-854-5943**

ATTACHMENT

40108524

P06000032262

FROM THE DESK OF

CHRISTOPHER SMITH

CHRISLEESMITH@MAC.COM

T (888)854-5943

June 12, 2008
Division of Corporations
State of Florida
P.O. Box 6198
Tallahassee, FL 32314

Dear Recipient,

I am writing to inform you that I did not receive the notice of annual renewal in the mail this year. As a result I did not remember to file my annual report. This was an unintentional error. As this is my first offense I am asking for waiver of the \$400 fine. I have included a check for the \$150 annual report filing fee as I want to take care of this matter as soon as I became aware of it. I have added this to my yearly calender so this will never happen again. This is a matter that I am taking very seriously and will I ensure never happens again regardless of notification.

Thank you for your time and consideration,

Christopher Smith

CEO/President
Likwid Productions Inc.