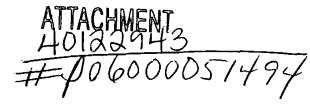
FILED Jul 05, 2007 8:00 am Secretary of State

2007 1	ANNUAL REPORT	JN

07-05-2007 90060 008 ***150.00 DOCUMENT # P06000051494 MAKÍMBO PRODUCTIONS, INC. 40122943 Principal Place of Business Mailing Address 3981 TALAH DR 3981 TALAH DR PALM HARBOR, FL 34684 PALM HARBOR, FL 34684 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07032007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 03-0588641 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6: Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TRIBBIA, MARK J Street Address (P.O. Box Number is Not Acceptable) 3981 TALAH DR PALM HARBOR, FL 34684 City Zip Code 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_ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 14, 2007 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. PD TITLE ☐ Delete TITLE Change ☐ Addition TRIBBIA, SUSAN A NAME NAME STREET ADDRESS 3981 TALAH DR STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL 34684 CITY ST 7IP VΡ TITLE ☐ Delete TITLE Change Addition TRIBBIA, SUSAN A NAME NAME STREET ADDRESS 3981 TALAH DR STREET ADDRESS PALM HARBOR, FL 34684 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition TRIBBIA, MARK J NAME NAME 3981 TALAH DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL 34684 CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- 7IP 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 signalure 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.

July 3, 2007



Dear Florida Department of State,

I've enclosed my 2007 Profit Corporation Annual Report Form, along with the appropriate annual fee of \$150.00.

This is in regards to a mailing I received only days ago. I had not received any notification prior.

Thank you and please phone with any additional questions.

Sincerely,

Mark J. Tribbia 727.785.2225