

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000061401

FILED
Jan 17, 2008
Secretary of State

Entity Name: XOOM ENTERTAINMENT, INC.

Current Principal Place of Business:

1000 UNIVERSAL STUDIOS PLAZA
SUITE 214
ORLANDO, FL 32819

New Principal Place of Business:

7800 SOUTHLAND BOULEVARD
SUITE 150
ORLANDO, FL 32809

Current Mailing Address:

4731 BLUE MAJOR DRIVE
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 02-0780630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAIED, MUSTAFA
4731 BLUE MAJOR DRIVE
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SAIED, MUSTAFA
Address: 4731 BLUE MAJOR DR
City-St-Zip: WINDERMERE, FL 34786

Title: T () Delete
Name: GREEN, AHMAN
Address: 1750 LIMESTONE TRAIL
City-St-Zip: DE PERE, WI 54115

Title: S () Delete
Name: ZIMMERMAN, NATALIE
Address: 1000 UNIVERSAL STUDIOS PLACE, SUITE 214
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: ZIMMERMAN, NATALIE
Address: 7800 SOUTHLAND BOULEVARD, SUITE 150
City-St-Zip: ORLANDO, FL 32809

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: MUSTAFA SAIED

P

01/17/2008

Electronic Signature of Signing Officer or Director

Date