


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2007 8:00 am
Secretary of State

07-16-2007 90129 047 ***150.00

| | |
|-------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # P06000108702 |  |
| 1. Entity Name ORBIT ARTS, INC. | |

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| Principal Place of Business 10010 CHRISTINE LANE SPRING HILL, FL 34608 US | Mailing Address 10010 CHRISTINE LANE SPRING HILL, FL 34608 US |
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|------------------------------------------------|----------------------------------------------------|
| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address 3069 ANDERSON SNOW RD |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. BMB 105 |
| City & State | City & State SPRING HILL, FL |
| Zip | Zip 34609 |
| Country | Country USA |



07022007 Chg-P CR2E034 (12/06)

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|-----------------------------------------------------------|--------------------------------------------------------------------------------------------|
| 4. FEI Number 20-5405269 | <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent SHINABERY, JOSEPH A 10010 CHRISTINE LANE SPRING HILL, FL 34608 | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code |
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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 *Joseph A. Shinabery* (NOTE: Registered Agent signature required when reinstating) DATE July 02, 2007

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| FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
|------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P SHINABERY, JOSEPH A 10010 CHRISTINE LANE SPRING HILL, FL 34608 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP JAYNES, CRAIG 14434 CORONADO DR SPRING HILL, FL 34609 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: *Joseph A. Shinabery* DATE July 02, 2007 DAYTIME PHONE # 352.232.5724