## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an atta

SIGNATURE:

## Apr 30, 2007 8:00 am Secretary of State **DOCUMENT # P06000113513** 1. Entity Name 04-30-2007 90457 047 \*\*\*163.75 PANDA FILMS, INC. Principal Place of Business Mailing Address **625 VICKS LANDING 625 VICKS LANDING** APOPKA, FL 32712 APOPKA, FL 32712 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 421 K Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 04162007 Chg-P 4. FEI Number Applied For City & State City & State Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name **NGUYEN, QUAN MINH** Street Address (P.O. Box Number is Not Acceptable) **625 VICKS LANDING** Kintla APOPKA, FL 32712 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Change ☐ Addition **PSTD** ☐ Defete TITLE TITLE NGUYEN, QUAN MINH NAME 1421 Kintla Rd. 625 VICKS LANDING. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP APOPKA, FL 32712 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete nn e TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 eath; 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 ant with an address, with all other like empowered