

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000092886

Entity Name: BON BON STUDIOS INC.

FILED
Jan 10, 2012
Secretary of State

Current Principal Place of Business:

107 S OAK AVENUE
SANFORD, FL 32771 US

New Principal Place of Business:

362 S PENNSYLVANIA AVE
SUITE 101
WINTER PARK, FL 32789 US

Current Mailing Address:

107 S OAK AVENUE
SANFORD, FL 32771 US

New Mailing Address:

362 S PENNSYLVANIA AVE
SUITE 101
WINTER PARK, FL 32789 US

FEI Number: 27-1302016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIXON, SARA A
618 S PALMETTO AVE
SANFORD, FL 32771 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

OFFICERS AND DIRECTORS:

Title: DIR
Name: NIXON, SARA A
Address: 618 S PALMETTO AVE
City-St-Zip: SANFORD, FL 32771 US

Title: PRES
Name: NIXON, SARA A
Address: 618 S PALMETTO AVE
City-St-Zip: SANFORD, FL 32771 US

Title: DIR
Name: NIXON, PEGGY S
Address: 623 SYLVAN RESERVE COVE
City-St-Zip: SANFORD, FL 32771 US

Title: VP
Name: NIXON, PEGGY S
Address: 623 SYLVAN RESERVE COVE
City-St-Zip: SANFORD, FL 32771 US

Title: SEC
Name: NIXON, SARA A
Address: 618 S PALMETTO AVE
City-St-Zip: SANFORD, FL 32771 US

Title: TRES
Name: NIXON, PEGGY S
Address: 623 SYLVAN RESERVE COVE
City-St-Zip: SANFORD, FL 32771 US

I hereby 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 all other like empowered.

SIGNATURE: PEGGY S NIXON, VICE PRESIDENT

VP

01/10/2012

Electronic Signature of Signing Officer or Director

Date