2004 FOR PROFIT CORPORATION

Jul 20, 2004 08:00 AM **ANNUAL REPORT Secretary of State DOCUMENT # P93000047808** STEREO PRODUCTIONS INC. Principal Place of Business Mailing Address 11605 SW. 32ND LANE 11605 SW. 32ND LANE MIAMI, FL 33165 MIAMI, FL 33165 07122004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0480829 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARCIA, GILBERTO DO NOT WRITE 11605 SW 32ND LANE MIAMI, FL 33165 IN THIS SPACE 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. GANCIA DINECTON SIGNATURE (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 8, 2004 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. TITLE 11000000167462 NAME GARCIA, GILBERTO 07/20/04-80005-020 150.00 STREET ADDRESS 11605 SW. 32ND LANE CITY-SI-ZIP MIAMI, FL 33165 TITLE NARAE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE NAME STREET ACCRESS CITY-ST-ZIP MEE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 charged, or on an attachment with an address, with all other, like empowered.

SIGNATURE:

CITY-ST-ZIP BELE

STREET ADDRESS City-St-21P

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED