

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000046989

Entity Name: STUDIO 356, INC.

FILED
Feb 07, 2005
Secretary of State

Current Principal Place of Business:

7643 ABONADO RD
TAMPA, FL 33615 US

New Principal Place of Business:

19143 MEADOW PINE DR
TAMPA, FL 33647 US

Current Mailing Address:

7643 ABONADO RD
TAMPA, FL 33615 US

New Mailing Address:

19143 MEADOW PINE DR
TAMPA, FL 33647 US

FEI Number: 65-0499348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIRITI, JOSEPH A JR.
PLAZA VENETIA
555 NE 15TH ST., SUITE 725
MIAMI, FL 33132 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: PD () Delete
Name: DUPRE, MITCHELL
Address: 7643 ABONADO RD
City-St-Zip: TAMPA, FL 33615 US

Title: PD () Delete
Name: DUPRE, MITCHELL
Address: 7643 ABONADO RD
City-St-Zip: TAMPA, FL 33615 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DUPRE, MITCHELL
Address: 19143 MEADOW PINE DR
City-St-Zip: TAMPA, FL 33647 US

Title: PD (X) Change () Addition
Name: DUPRE, MITCHELL
Address: 19143 MEADOW PINE DR
City-St-Zip: TAMPA, FL 33647 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MITCHELL DUPRE

PD

02/07/2005

Electronic Signature of Signing Officer or Director

Date