2008 FOR PROFIT CORPORATION **ANNUAL REPORT** DOCUMENT # P97000020840 1. Entity Name ROE ENTERTAINMENT, INC Principal Place of Business Mailing Address 34876 EMERALD COAST PARKWAY 1217 AIRPORT RD DESTIN, FL 32541 STE 419 DESTIN, FL 32541 DO NOT WRITE IN THIS SPACE

FILED Apr 18, 2008 08:00 All Secretary of State



| PAME, AL | PORT RD STE 119 | O3262008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For S9-3435394 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required DO NOT WRITE IN THIS SPACE | | | | |
|--|---|--|----------------------------|-------------------|------------------------|--|
| the obligati | named entity submits this statement for the plans of registered agent. Separan bacatars regramma consensual consensual transfer in the time. | dustification dustifications 9. Election Campaign Finan | s Aport signature required | when reinstating) | n, in the State of Flo | rida. I am familiar with, and accept DATE |
| After May 1, 2008 Fee will be \$550.00 | | Trust Fund Contribution. | | ed to Fees | | |
| 10. | OFFICERS AND DIREC | JTOH\$ | | | | |
| TOTAL CAME | PHILLIPS-ROE, BOBBI ANN | | | | | |
| STREET ADDRESS | 34876 EMERALD COAST PKWY | | | | | |
| CITY ST-ZIP | DESTIN, FL. 32541 | | | | | |
| ITTLE | PD | | 1 | | 1100000 | nnmarr |
| NAME | ROE, STEVEN J SR. | | ł | | UUUUUU - ∩∈ /∩1 /∩∩ | 1905065 00000 000 150 00 |
| STREET ADDRESS | 34876 EMERALD COAST PKWY | | | | 02/01/02- | 80036-023 150.00 |
| QH3 ST ZIP | DESTIN, FL 32541 | | | | | |
| MILE | VPD | | | | | |
| HAME | PHILLIPS, SANDRA K | | | | | |
| STREET ADDRESS | 1217 AIRPORT RD 419 | | | חח | NOT W | RITE |
| EETS STEED | DESTIN, FL 32541 | | | | - - | |
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12. Thereby certify that the information supplied with this filling 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 arrivess. In all other like empowered.

STREET ADDRESS CITY ST-ZIP

SIGNATURE AND TYPES OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

850-650-52