## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State** DOCUMENT # P97000085322 02-06-2006 90058 044 \*\*\*150.00 1. Entity Name WAYNE PRODUCTIONS, INC. Principal Place of Business Mailing Address C/O HUFFMAN C/O HUFFMAN 350 ROYAL PALM WAY #409 350 ROYAL PALM WAY #409 PALM BEACH, FL 33480 US PALM BEACH, FL 33480 US 01092006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0785394 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HUFFMAN, KENT ESQ. DO NOT WRITE 350 ROYAL PALM WAY **SUITE 409** IN THIS SPACE PALM BEACH, FL 33480 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fee 10. OFFICERS AND DIRECTORS TITLE GRUBER, KARL W NAME STREET ADDRESS C/O HUFFMAN 350 ROYAL PALM WAY CITY-ST-71P PALM BEACH, FL 33480 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. 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 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 address, with all other like empowered.

**SIGNATURE** 

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

1-31-06

561-602-5626 Daytime Phone #

FILED Feb 06, 2006 8:00 am

## ATTACHMENT KENT HUFFMAN

ATTORNEY AT LAW 350 ROYAL PALM WAY - SUITE 409 PALM BEACH, FLORIDA 33480

> TELEPHONE (561) 833-5833 FAX (561) 835-0855 huffmank@bellsouth.net

> > January 9, 2006

FEB 3

Secretary of State Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500 HP9700005322

Sincerely.

Re: WAYNE PRODUCTIONS, INC.

Dear Sirs:

Accompanying this letter you will find the 2005 UNIFORM BUSINESS REPORT of the above referenced corporation, and a check in the amount of \$150.00, payable to the DEPARTMENT OF STATE to cover your fee for this filing.

KH/mac