


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2006 8:00 am
Secretary of State

02-02-2006 90081 050 ***150.00

DOCUMENT # P98000005355	
1. Entity Name FLORIDA SYSPRODUCTIONS, INC.	

Principal Place of Business 1900 SOUTH TREASURE DRIVE NO. 9T NORTH BAY VILLAGE, FL 33141	Mailing Address 1900 SOUTH TREASURE DRIVE NO. 9T NORTH BAY VILLAGE, FL 33141
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2. Principal Place of Business 1440 J. F. Kennedy Cswy. Suite, Apt. #, etc. SUITE 411	3. Mailing Address 1440 J. F. Kennedy CAUSEWAY Suite, Apt. #, etc. SUITE "411"
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City & State NORTH BAY VILLAGE FL	City & State NORTH BAY VILLAGE FL
Zip 33141	Country USA



01132006 Chg-P CR2E034 (11/05)

4. FEI Number 65-0806729	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent VALDIVIA, SONNIA 1900 S. TREASURE DRIVE NO. 9T NORTH BAY VILLAGE, FL 33141
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7. Name and Address of New Registered Agent Name VALDIVIA, SONNIA Street Address (P.O. Box Number is Not Acceptable) 1865 79 ST CAUSEWAY No. 7B City NORTH BAY VILLAGE FL Zip Code 33141

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 <i>Sonia Valdivia</i>	DATE 1-23-06
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FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD VALDIVIA, SONNIA 1900 KENNEDY CAUSEWAY NO. 219 NORTH BAY VILLAGE, FL 33141 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD VALDIVIA, JUAN ROSAS 1900 S TREASURE DRIVE 9T NORTH BAY VILLAGE, FL 33141 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD VALDIVIA, JUAN ROSWALDO 1900 S TREASURE DR 9T NORTH BAY VILLAGE, FL 33141 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVD ARANIBAR, NORMA 1900 S TREASURE DR #9 T NORTH BAY VILLAGE, FL 33141 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VALDIVIA SONNIA <input type="checkbox"/> Change <input type="checkbox"/> Addition PTD 1865 79 ST. CAUSEWAY Apt "7B" NORTH BAY VILLAGE FL 33141
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD <input type="checkbox"/> Change <input type="checkbox"/> Addition VALDIVIA JUAN ROSAS 1865 79 ST. CAUSEWAY Apt "7B" NORTH BAY VILLAGE FL 33141
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD <input type="checkbox"/> Change <input type="checkbox"/> Addition VALDIVIA, JUAN ROSWALDO 1865 79 ST. CAUSEWAY Apt "7B" NORTH BAY VILLAGE FL 33141
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVD <input type="checkbox"/> Change <input type="checkbox"/> Addition ARANIBAR NORMA 1865 79 ST. CAUSEWAY Apt "7B" NORTH BAY VILLAGE FL 33141
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: <i>Sonia Valdivia</i>	DATE: 1-23-06	TELEPHONE: 305-864-6429
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone # 305-343-4972