2005 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Apr 14, 2005 08:00 AM DOCUMENT # P98000040374 **Secretary of State** 1. Entity Name JEXTER ENTERTAINMENT, INC. Principal Place of Business Mailing Address 4304 CENTER KEY RD., SUITE 2421 4304 CENTER KEY RD., SUITE 2421 WINTER PARK, FL 32792 WINTER PARK, FL 32792 No Chg-P 04072005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3518448 Not Applicat \$8.75 Additional 5. Certificate of Status Desired Fee Required B. Name and Address of Current Registered Agent KISSINGER, JEFFREY G DO NOT WRITE 4304 CENTER KEY RD., SUITE 2421 WINTER PARK, FL 32792 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. SIGNATURE. Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TILE NAME KISSINGER, JEFFREY G STREET ADDRESS 4304 CENTER KEY RD., SUITE 2421 *1100000205475* CITY-ST-ZIP WINTER PARK, FL 32792 114/14/05-80087-002 150.00 SDT TITLE CRISSY, REBECCA NAME STREET ADDRESS 618 W.KING ST. CATY-ST-ZIP ORLANDO, FL 32804 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIF IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME

FILED

SIGNATURE. Jeffrey G. Kissing Jeffrey G. Kissinger/4/9/05/407-671-854

^{12.} I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.