

2005 FOR PROFIT CORPORATION ANNUAL REPORT

P98000089913
FILED

2007 MAY -8 PM 5:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000089913

1. Entity Name
STUDIO 719, INC.



Principal Place of Business
643 34TH STREET
WEST PALM BEACH, FL 33407

Mailing Address
643 34TH STREET
WEST PALM BEACH, FL 33407

DO NOT WRITE IN THIS SPACE



04282005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0886229 Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

5. Name and Address of Current Registered Agent

JAMES, KEITH A ESQ.
5725 CORPORATE WAY, STE.106
WEST PALM BEACH, FL 33407

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME JEFFERSON, LEA J
STREET ADDRESS 643 34TH STREET
CITY-ST-ZIP WEST PALM BEACH, FL 33407

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900103197489
05/24/07--01026--017 **150.00

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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.

SIGNATURE: *Lea Jefferson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/07 *561-882-0970*
Date Daytime Phone #

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