2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 20, 2006 08:00 AM **DOCUMENT # P99000017294 Secretary of State** 1. Enliv Name CLAVEBOP PRODUCTIONS, INC. Mailing Address Principal Place of Business 1921 BELFORD COURT 1921 BELFORD COURT MAITLAND, FL 32751 MAITLAND, FL 32751 03052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied Fat 4. FEI Number 59-3564657 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RADI, MICHAEL J DO NOT WRITE 1921 BELFORD COURT MAITLAND, FL 32751 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 egistereb 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 U000000474441 FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 04/04/06-80023-022 150.00 10. OFFICERS AND DIRECTORS D TITLE NAME RADI, MICHAEL J STREET ADDRESS 1921 BELFORD COURT City-ST-21P MAITLAND, FL 32751 TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS DO NOT WRITE CATY-ST-ZIP TITLE IN THIS SPACE NAGAE STREET ADDRESS CITY-ST-ZIP NAME STREET ABORESS City-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby 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 chapter 607, and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes.

NTED NAME OF SIGNING OFFICER OR DIRECTOR

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