

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000054462

Entity Name: I AM PRODUCTIONS, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

4555 LENOX BLVD
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

P O BOX 616495
ORLANDO, FL 328616495

New Mailing Address:

FEI Number: 59-3585577

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERRE, S HARRIS
4555 LENOX BLVD
ORLANDO, FL 32811 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: EVP () Delete
Name: PIERRE, KATIE I
Address: 4555 LENOX BLVD
City-St-Zip: ORLANDO, FL 32811

Title: CEO () Delete
Name: PIERRE, S HARRIS
Address: 4555 LENOX BLVD
City-St-Zip: ORLANDO, FL 32811

Title: P (X) Delete
Name: PIERRE, S HARRIS
Address: 4555 LENOX BLVD
City-St-Zip: ORLANDO, FL 32811

Title: COB (X) Delete
Name: PIERRE, S HARRIS
Address: 4555 LENOX BLVD
City-St-Zip: ORLANDO, FL 32811

Title: CFO (X) Delete
Name: PIERRE, S HARRIS
Address: 4555 LENOX BLVD
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PIERRE, S HARRIS
Address: 4555 LENOX BLVD
City-St-Zip: ORLANDO, FL 32811

Title: V (X) Change () Addition
Name: PIERRE, KATIE I
Address: 4555 LENOX BLVD
City-St-Zip: ORLANDO, FL 32811

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S HARRIS PIERRE

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date