2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 29, 2007 08:00 AM **DOCUMENT # P99000077880 Secretary of State** 1. Entity Name BROADCAST PRODUCER.COM, INC. Principal Place of Business Mailing Address 11219 BLOOMINGTON DR. 11219 BLOOMINGTON DR. TAMPA, FL 33635 TAMPA, FL 33635 01252007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3593860 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HALLINAN, MARK DO NOT WRITE 11219 BLOOMINGTON DR. TAMPA, FL 33635 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. U00000606368 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 01/30/07-80074-019 150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS **DPVS** TITLE NAME HALLINAN, MARK 11219 BLOOMINGTON DR. STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33635 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE

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 changed, or on an attachment with an address, with all other like empowered.

CICALATUDE.

NAME STREET ADDRESS CITY-ST-ZIP

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

Mark Hallinan