## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2008 08:00 A
Secretary of State

ANNUAL REPORT				Jan 23, 2000 00			
DOCU	MENT # P990000814	14				Secretary of	
1. Entity Name MAILBOA	T RECORDS, INC.						
256 WORTH AVENUE #Q-R PALM BEACH, FL 33480		Mailing Address 1880 CENTURY PARK EAST 1600 LOS ANGELES, CA 90067					
		NI TIUO 004	<b>.</b>	01082008	No Chg-P	CR2E034 (11/05)	
	O NOT WRITE	IN THIS SPA	CE .	4. FEI Number 95-4761		Applied For Not Applicable	
			•		of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current Re	gistered Agent					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525					NOT W HIS SF		
	Signature, hyped or printed name of registered agent and ENOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Fina	- page 7 -	d when reinstating) .00 May Be		DATE	
10.	OFFICERS AND D	RECTORS	J.,		4 m 3 g 3 2	garther the state of the state of	
TITLE NAME STREET ADDRESS CITY-SY-ZIP	D BUFFETT, JIMMY 256 WORTH AVENUE #Q-R PALM BEACH, FL 33480				Ü0000 01/23/08	00791656 3-80083-025 150.00	
TITLE NAME STREET ADDRESS CATY-ST-ZIP	S RENNERT, IRWIN 1880 CENTURY PARK EAST STE LOS ANGELES, CA 90067	. 1600		6			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	/RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			100 mg	IN 7	THIS SI	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Va Di				
TITLE					March 19 Jan 1		

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

- INUIN RENDERT

01/<sub>17/08</sub>

(310)553-1707

Daytime Pt