## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

## FILED May 02, 2006 8:00 am Secretary of State 05-02-2006 90188 035 \*\*\*150.00

1. Entity Name	MENT # V0/692  ENTERTAINMENT, INC.				03-02-2006 \$	90188 033 *** 130	.00
	e of Business RT ROAD SOUTH 34112 US	Mailing Address 2666 AIRPORT ROAD SO NAPLES, FL 34112	DUTH US	1 (18) 1 (18)	011) (1881) 8 011/4 (1811) 1881	BJOH BIEN BIEN EITH BIBH BIBH	(1 <b>1</b> 1)    (111)
2. Principal Place of Business 3050 N · Horse shoe Dr 3050 N · Horse			shoe Dr				
Suite, Apt. 105		Suite, Apt. #, etc. 105		04172006	Chg-P	CR2E034 (11/05)	
City & State Naples, FL		Naples, FL		4. FEI Number 65-0353	398	<del>  </del>	plied For t Applicable
34104	Country  US	<sup>Zip</sup> 34104	Country	5. Certificate o	Status Desired	S8.75 Add Fee Required	
	6. Name and Address of Current F	Registered Agent	Name	7. Name and A	ddress of New R	egistered Agent	
HIGGS, WILLIAM T				e st Address (P.O. Box Number is Not Acceptable)			
NAPLES, F	ORT ROAD SOUTH		30	3050 N. Horse shoe Tor.			
			Su	Suite 105			
			City	Naples FL 34104			
	named entity submits this statement for	the purpose of changing its	registered office or	registered agent, or both	, in the State of Flo	rida. I am familiar with,	and accept
the obligations of registered agent.  SIGNATURE							
	Singeture, typed or perited name of recistered acent a	od titla gonilostria. (NOTE:	Registered Agent signatu	re received when minutation)	<del></del>	DATE	
	Signature, typed or pented name of registered agent a	nd title applicable. (NOTE:	: Registered Agent signat.	re required when reinstation)		DATE	
FILI	Signature, typed or pritted name of registered agent as E NOVIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaig	gn Financing	\$5.00 May Be Added to Fees		DATE	
FILI After Ma	E NOVIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaig Trust Fund Contr	gn Financing ibution.	\$5.00 May Be Added to Fees	HANGES TO OFFI	DATE	
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I nereoy ceruly 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: DEL SULLA SULLA SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/25/06 Date