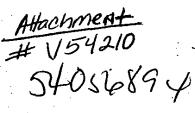
2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State 06-07-2004 90001 007 ***150.00 DOCUMENT # V54210 WILD ROPE PRODUCTIONS, INC. Principal Place of Business Mailing Address 54056894 1400 CATTLEMEN RD 1400 CATTLEMEN RD SUITE A SUITE A SARASOTA, FL 34232 US SARASOTA, FL 34232 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 06032004 Chg-P Applied For City & State City & State 4. FEI Number 65-0348922 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FETTERMAN, JAMES C. Street Address (P.O. Box Number is Not Acceptable) 515 S WASHINGTON BLVD SARASOTA, FL 34236 Zip Code City 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 illustration of segment and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Due by September 8, 2004 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Change ☐ Addition ☐ Delete FETTERMAN, JAMES C. NAME NAME 515 S WASHINGTON BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL CITY-ST-ZIP Bence VINCE. 1400 Eattlemen Rd. Suite A. 1400 Eattlemen Rd. 34232-624 TITLE Delete THTLE Addition BRUCE, VINCE NAME NAME 50 E 3RD ST APT 5C STREET ADDRESS STREET ADDRESS SARASOTA, FL 34232-6246. NEW YORK, NY CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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

FILED Jun 07, 2004 8:00 am





The Wizard of Whips & Lariats

Floride Dept. of State

Div. of Conscrations

P.O. Box 6327.

Tallahassee, Fl. 32314

Jan 3ad 2004.

Dear Sir et Maden

please accept the enclosed Check

for \$150 for my 2004 Annual report filing.

I'm very Sorry that this is overdue

Since May like. My business mail for the Company

Soes threath to my accountant's address because

my business as a performer takes her all over

the Country

I'm fortunally of was abroad and there your

piece of mail - The notification porticin for Annual filing, did not get forwarded onto me until just now.

So pleese accept my humbless applosies

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