


FILED
Feb 12, 2007 8:00 am
Secretary of State

01-16-2007 90191 033 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # V33828 1. Entity Name TLF PRODUCTIONS, INC.	
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Principal Place of Business 8802 SO ORCHARD RD N. DAVIE, FL 33328	Mailing Address 1115 REDWOOD ST HOLLYWOOD, FL 33019
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DO NOT WRITE IN THIS SPACE

01052007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0311776	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent FULLER, TAMMI L 8829 SO. ORCHARD RD N. DAVIE, FL 33328

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remaining)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD FULLER, TAMMI L 8829 SO. ORCHARD RD NO. DAVIE, FL 33328
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST LEADER, JERRY 1115 REDWOOD ST. HOLLYWOOD, FL 33019
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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: *Tammi L Fuller* SEC. TREAS 2/7/07 305-606-5380
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #