

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED .
Mar 02, 2004 08:00 AM
Secretary of State

DOCUMENT # F02000004001 1. Entity Name GENERATIONAL ART PRODUCTIONS INC.	
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Principal Place of Business 133 WEST 25TH STREET, 6TH FLOOR EAST NEW YORK, NY 10001	Mailing Address 133 WEST 25TH STREET, 6TH FLOOR EAST NEW YORK, NY 10001
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DO NOT WRITE IN THIS SPACE



02152004 No Chg-P CR2E034 (10/03)

4. FEI Number 13-3756440	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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

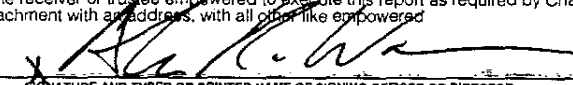
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	UD00000074078 03/03/04-80003-015 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	SCEO GERARD, IAN 133 WEST 25TH STREET, 6TH FLOOR EAST NEW YORK, NY 10001
TITLE NAME STREET ADDRESS CITY ST ZIP	PTD WALDEN, ADAM 133 WEST 25TH STREET, 6TH FLOOR EAST NEW YORK, NY 10001
TITLE NAME STREET ADDRESS CITY ST ZIP	D GERARD, STEFAN 133 WEST 25TH STREET, 6TH FLOOR EAST NEW YORK, NY 10001
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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 with an address, with all other like empowered.

SIGNATURE:  02/29/04 212-255-7300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #