

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000041209

**FILED**  
**Dec 08, 2008**  
**Secretary of State**

**Entity Name:** OFF-SIDE PRODUCTIONS CORP.

**Current Principal Place of Business:**

227 LEAWOOD CIR  
NAPLES, FL 34104

**New Principal Place of Business:**

227 LEAWOOD CIR.  
NAPLES, FL 34104

**Current Mailing Address:**

227 LEAWOOD CIR  
NAPLES, FL 34104

**New Mailing Address:**

P.O. BOX 10128  
NAPLES, FL 34101

**FEI Number:** 04-3751762

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CARDOZO, RODOLFO  
227 LEAWOOD CIR  
NAPLES, FL 34104 US

**Name and Address of New Registered Agent:**

CARDOZO, RODOLFO  
222 LEAWOOD CIR  
NAPLES, FL 34104 US

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.

SIGNATURE: RODOLFO A. CARDOZO

12/08/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTSD ( ) Delete  
Name: CARDOZO, RODOLFO  
Address: 227 LEAWOOD CIR  
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Delete  
Name: CARDOZO, LIDIA I  
Address: 227 LEAWOOD CIR  
City-St-Zip: NAPLES, FL 34104

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTSD (X) Change ( ) Addition  
Name: CARDOZO, RODOLFO  
Address: 222 LEAWOOD CIR  
City-St-Zip: NAPLES, FL 34104

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RODOLFO A. CARDOZO

PSDT

12/08/2008

Electronic Signature of Signing Officer or Director

Date