

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044063

Entity Name: CHI PRODUCTIONS INC.

FILED  
Apr 15, 2005  
Secretary of State

**Current Principal Place of Business:**

5611 HAMMOCK LANE  
LAUDERHILL, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

5611 HAMMOCK LANE  
LAUDERHILL, FL 33319

**New Mailing Address:**

FEI Number: 56-2333562

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHINTALA, JOHN  
5611 HAMMOCK LANE  
LAUDERHILL, FL 33319 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CEOD ( ) Delete  
Name: CHINTALA, JOHN  
Address: 5611 HAMMOCK LANE  
City-St-Zip: LAUDERHILL, FL 33319

Title: CFOD ( ) Delete  
Name: CHINTALA, RICHARD  
Address: 1285 WYOMING AVE.  
City-St-Zip: EXETER, PA 18643

Title: VD ( ) Delete  
Name: CHINTALA, JOHANNA  
Address: 1285 WYOMING AVE.  
City-St-Zip: EXETER, PA 18643

Title: SD ( ) Delete  
Name: CHINTALA, ANN MARIE  
Address: 5611 HAMMOCK LANE  
City-St-Zip: LAUDERHILL, FL 33319

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN CHINTALA

CEOD

04/15/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date