

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000026191

Entity Name: GVP PRODUCTIONS, INC.

FILED  
Mar 27, 2011  
Secretary of State

**Current Principal Place of Business:**

461 SE VOLKERTS TERRACE  
PORT SAINT LUCIE, FL 34983 US

**New Principal Place of Business:**

**Current Mailing Address:**

461 SE VOLKERTS TERRACE  
PORT SAINT LUCIE, FL 34983 US

**New Mailing Address:**

FEI Number: 20-4621076

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GONZALEZ, ANTONIO J  
461 SE VOLKERTS TERRACE  
PORT SAINT LUCIE, FL 34983 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GONZALEZ, ANTONIO J  
Address: 461 SE VOLKERTS TERRACE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP  
Name: GONZALEZ, JEFFERSON  
Address: 461 SE VOLKERTS TERRACE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP  
Name: GONZALEZ, MARIA C  
Address: 461 SE VOLKERTS TERRACE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP  
Name: GONZALEZ, HAROLD A  
Address: 461 SE VOLKERTS TERRACE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP  
Name: FRAGA, CAROLINA  
Address: 461 SE VOLKERTS TERRACE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

I hereby 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 all other like empowered.

SIGNATURE: ANTONIO GONZALEZ

P

03/27/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date