

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000038806

1. Entity Name

PEN PRODUCTIONS OF AMERICA, INC



Principal Place of Business

11186 SPRING HILL DR
307
SPRING HILL FL 34609

Mailing Address

11186 SPRING HILL DR
307
SPRING HILL FL 34609



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/07)

4. FEI Number

20-4515434

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARY LOUISE, PENNISI
11186 SPRING HILL DR
SPRING HILL FL 34609

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Mary Louise Pennisi (NO CHANGES) 2/5/08

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PT ☐ Delete
NAME MARY LOUISE, PENNISI
STREET ADDRESS 11186 SPRING HILL DR #307
CITY-ST-ZIP SPRING HILL FL 34609

TITLE ☐ Change ☐ Addition
NAME 000000323416
STREET ADDRESS 02/20/08-80038-002 158.75
CITY-ST-ZIP

TITLE V ☐ Delete
NAME DE LA BASTIDE, ANGELA
STREET ADDRESS 11186 SPRING HILL DR #307
CITY-ST-ZIP SPRING HILL FL 34609

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME DE LA BASTIDE, JAMES
STREET ADDRESS 11186 SPRING HILL DR #307
CITY-ST-ZIP SPRING HILL FL 34609

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 information.

SIGNATURE:

Mary Louise Pennisi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/08 (352) 263-0146

DATE

Daytime Phone #