2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JUL 20 PM 5:20

DOCUMENT # P06000073369

1. Entity Name
S & P PROMOTIONS, INC.

01/26/07 90024 010 $150.00

Principal Place of Business	Mailing Address
17624 CANDLEWOOD TERRACE BOCA RATON, FL 33487	17624 CANDLEWOOD TERRACE BOCA RATON, FL 33487

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt #, etc.		Suite, Apt. #, etc	
City & State		City & State	
Zip	Country	Zip	Country

01222007 Chg-P CR2E034 (12/06)

4. FEI Number 71-1006047 ☐ Applied For ☐ Not Applicable

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
MATHEWS, III, GEORGE W ESQ 1325 SOUTH CONGRESS AVENUE SUITE 104 BOYNTON BEACH, FL 33426	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 ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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 NAME STREET ADDRESS CITY-ST-ZIP	DP REILLY, SUSAN 17624 CANDLEWOOD TERRACE BOCA RATON, FL 33487	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Susan Reilly 1/22/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

July 16, 2007

S & P Promotions. Inc.
17624 Candlewood Ter.
Boca Raton, Fl 33487
561-302-9011

Gary Blankenbaker
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

RE: Annual Report

Dear Mr. Blankenbaker;

It was a pleasure speaking with you today. As we discussed I filed the report on January 22nd 2007, however I did not complete box #4. Unfortunately I did not receive the notice that it was incomplete.

I am enclosing the completed form and I would greatly appreciate it if you would waive the late fee.

Sincerely,

Susan Reilly
President