

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000090845

FILED  
May 01, 2008  
Secretary of State

Entity Name: 4 ALL PRODUCTIONS, INC.

**Current Principal Place of Business:**

9481 RICHMOND CIRCLE  
BOCA RATON, FL 33434

**New Principal Place of Business:**

**Current Mailing Address:**

9481 RICHMOND CIRCLE  
BOCA RATON, FL 33434

**New Mailing Address:**

FEI Number: 65-0870512      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LOPEZ, ANTHONY L  
9481 RICHMOND CIRCLE  
BOCA RATON, FL 33434      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

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: P ( ) Delete  
Name: LOPEZ, ANTHONY L  
Address: 9481 RICHMOND CIRCLE  
City-St-Zip: BOCA RATON, FL 33434

Title: T ( ) Delete  
Name: LOPEZ, ADRIANN  
Address: 9481 RICHMOND CIRCLE  
City-St-Zip: BOCA RATON, FL 33434

Title: VP ( ) Delete  
Name: LOPEZ, ADRIANN  
Address: 9481 RICHMOND CIR  
City-St-Zip: BOCA RATON, FL 33434

Title: TR (X) Delete  
Name: CONWAY, JOHN III  
Address: 12726 WESTPORT CIRCLE  
City-St-Zip: WELLINGTON, FL 33414

Title: TR (X) Delete  
Name: SANTIPADRI, PETER  
Address: 132 SW 15TH. STREET  
City-St-Zip: POMPANO BEACH, FL 33060

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

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

Title: VP (X) Change ( ) Addition  
Name: LOPEZ, ADRIANN  
Address: 9481 RICHMOND CIRCLE  
City-St-Zip: BOCA RATON, FL 33434

Title: D (X) Change ( ) Addition  
Name: CONWAY, JOHN III  
Address: 12726 WESTPORT CIRCLE  
City-St-Zip: WELLINGTON, FL 33414

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 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: ADRIANN LOPEZ

VP

05/01/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date