

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000121758

Entity Name: STOOSH PRODUCTIONS, INC**Current Principal Place of Business:**2639 OAK PARK CIRCLE
DAVIE, FL 33328**Current Mailing Address:**2639 OAK PARK CIRCLE
DAVIE, FL 33328**FEI Number:** 20-5618685**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HIGGINS, STEVE ES
2639 OAK PARK CIRCLE
DAVIE, FL 33328 US*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**Officer/Director Detail :**

Title	P,D
Name	HIGGINS, STEVE ES
Address	2639 OAK PARK CIRCLE
City-State-Zip:	DAVIE FL 33328
Title	D
Name	DAVIS, HEATHER M
Address	7950 NOB HILL ROAD SUITE 15-306
City-State-Zip:	TAMARAC FL 33321
Title	DIRECTOR
Name	KELLY-HOILETT, W. DOROTHENE
Address	2639 OAK PARK CIRCLE
City-State-Zip:	DAVIE FL 33328

Title	VP
Name	MINTO, JUNE
Address	888 BISCAYNE BLVD 4111
City-State-Zip:	MIAMI FL 33132
Title	DIRECTOR, PRODUCTION MANAGER
Name	HIGGINS, SIMONE R
Address	2639 OAK PARK CIRCLE
City-State-Zip:	DAVIE FL 33328
Title	D
Name	MORRELL, FIONA T
Address	2639 OAK PARK CIRCLE
City-State-Zip:	DAVIE FL 33328

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: STEVE E S HIGGINS**PRESIDENT, DIRECTOR****05/01/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date