

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000087356

**Entity Name:** XPRESSIONS FOR PERFORMING ARTS, INC.

**Current Principal Place of Business:**

7667 LAKE WORTH ROAD, SUITE B  
LAKE WORTH, FL 33467

**Current Mailing Address:**

7667 LAKE WORTH ROAD, SUITE B  
LAKE WORTH, FL 33467

**FEI Number: 87-3317646**

**Certificate of Status Desired: No**

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

WEISSMAN, HAROLD ESQ.  
1776 PINE ISLAND ROAD  
SUITE 224  
PLANTATION, FL 33322 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 D  
Name JOBONIELLO, KYLISSA  
Address 7667 LAKE WORTH ROAD, SUITE B  
City-State-Zip: LAKE WORTH FL 33467

*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: KYLISSA JOBONIELLO**

**P**

**01/22/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date