2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2008 08:00 AM
Secretary of State

DOCUMENT # F94000000986

1. Entity Name
SOUTHERN SHOWS, INC.

Principal Place of Business	Mailing Address
810 BAXTER ST CHARLOTTE, NC 28202 US	P.O. BOX 36859 CHARLOTTE, NC 28236

(F94000000986P)

01082008 No Chg-P CR2E034 (11/05)

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4. FEI Number
56-0753673

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHWARTZ, JESSE
3247 LAKEVIEW OAKS DR
LONGWOOD, FL 32779

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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 _____ JESSE SCHWARTZ 1/18/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00.
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CEO
NAME	ZIMMERMAN, JOAN
STREET ADDRESS	810 BAXTER ST
CITY-ST-ZIP	CHARLOTTE, NC
TITLE	P
NAME	ZIMMERMAN, DAVID
STREET ADDRESS	810 BAXTER ST
CITY-ST-ZIP	CHARLOTTE, NC
TITLE	S
NAME	ZIMMERMAN, ROBERT
STREET ADDRESS	810 BAXTER ST
CITY-ST-ZIP	CHARLOTTE, NC
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 my address, with all other like empowered.

SIGNATURE: _____ DAVID J. ZIMMERMAN 2/13/08 (704)376-6594
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #