

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 810 BAXTER ST CHARLOTTE, NC 28202 US	Mailing Address P.O. BOX 36859 CHARLOTTE, NC 28236
---	---

DO NOT WRITE IN THIS SPACE

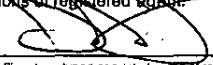
(F94000000986P)

01082008 No Chg-P CR2E034 (11/05)

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
--

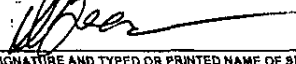
DO NOT WRITE IN THIS SPACE

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

DO NOT WRITE IN THIS SPACE

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