



2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M54278 1. Entity Name JOSEPH H. KANTER PRODUCTIONS, INC.					
Principal Place of Business C/O JOSEPH H. KANTER 4770 BISCAYNE BLVD. #1150 MIAMI, FL 33137 US			Mailing Address 9792 WINDISCH RD WEST CHESTER, OH 45069 US		
2. Principal Place of Business 4770 Biscayne Blvd. Suite, Apt. #, etc. Suite 1150 City & State Miami, FL		3. Mailing Address 4770 Biscayne Blvd. Suite, Apt. #, etc. Suite 1150 City & State Miami, FL			
Zip 33137		Country USA		4. FEI Number 59-2825289	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For <input type="checkbox"/> Not Applicable			
6. Name and Address of Current Registered Agent KANTER, JOSEPH H. 4770 BISCAYNE BLVD. SUITE #1150 MIAMI, FL 33137					
7. Name and Address of New Registered Agent Name CORPDIRECT AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 103 North Meridian Street Lower Level City Tallahassee FL Zip Code 32301					
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 <u><i>Joseph H. Kanter</i></u> Asst. Sec. 4-27-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KANTER, JOSEPH H. <input type="checkbox"/> Delete 4770 BISCAYNE BLVD, #1150 MIAMI, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD <input checked="" type="checkbox"/> Delete KANTER, NANCY R. 4770 BISCAYNE BLVD, #1150 MIAMI, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input type="checkbox"/> Delete KANTER, JOHN E(RECORDING 4770 BISCAYNE BLVD, #1150 MIAMI, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete PRICE, HAROLD 4770 BISCAYNE BLVD, #1150 MIAMI, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete SOLOMON, LAWRENCE 4770 BISCAYNE BLVD, #1150 MIAMI, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS <input checked="" type="checkbox"/> Delete WILDERMUTH, ROBERT E 9852 WINDISCH RD WEST CHESTER, OH 45069				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition T Maritza Pereyra 4770 Biscayne Blvd., #1150 Miami, FL 33137					
TITLE NAME <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VD Cathryn Conroy 4770 Biscayne Blvd., #1150 Miami, FL 33137					
TITLE NAME <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition John E Kanter <i>Sign</i>					
TITLE NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition 100054123651 05/10/05--01006--021 **150.00					
TITLE NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition (Empty row)					
TITLE NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition (Empty row)					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u><i>John E. Kanter</i></u> John E. Kanter 4-26-05 305 576 4310 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

FILED
05 APR 27 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts APR 27 2005