2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# N02000005314

Entity Name: TRANZENDANCE DANCE PRODUCTIONS INC.

Current Principal Place of Business:

9923 S. HOLLYBROOK LAKE DR
UNIT 104
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

9923 S. HOLLYBROOK LAKE DR.
UNIT 104
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: 82-0565356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VALENZUELA, CHERILYN A
9923 S. HOLLYBROOK LAKE DR
UNIT 104
PEMBROKE PINES, FL 33025 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	VALENZUELA, CHERILYN	
Address:	9923 S. HOLLYBROOK LAKE DR, UNIT 104	
City-St-Zip:	PEMBROKE PINES, FL 33025	
Title:	VD	( ) Delete
Name:	RODRIGUEZ, JESUS	
Address:	12805 SW 50 LANE	
City-St-Zip:	MIAMI, FL 33175	
Title:	VD	( ) Delete
Name:	SMITH, SAHARA	
Address:	7980 NW 50 ST., #310	
City-St-Zip:	LAUDERHILL, FL 33351	
Title:	SD	( ) Delete
Name:	LOWE, AYANNA	
Address:	3850 NW 115 AVE.	
City-St-Zip:	CORAL SPRINGS, FL 33065	
Title:	TD	( ) Delete
Name:	THOMAS, TREMAINE	
Address:	3850 NW 115 AVE.	
City-St-Zip:	CORAL SPRINGS, FL 33065	
Title:	D	( ) Delete
Name:	ALEXANDER, EVONNE	
Address:	1462 SW 97 LANE	
City-St-Zip:	DAVIE, FL 33324	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHERILYN VALENZUELA PD 04/30/2005

Electronic Signature of Signing Officer or Director — Date