

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N03000001349

1. Entity Name

FAR BEYOND THE HORIZON ENTERTAINMENT, INC.



**FILED**  
**Apr 23, 2007 08:00 AM**  
**Secretary of State**

Principal Place of Business

7953 SW 6TH STREET  
NORTH LAUDERDALE FL 33068

Mailing Address

7953 SW 6TH STREET  
NORTH LAUDERDALE FL 33068



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

03-0498286

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARTIN, SHIRLEY  
7953 SW 6TH STREET  
NORTH LAUDERDALE FL 33068

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MARTIN, SHIRLEY	
STREET ADDRESS	7953 SW 6TH STREET	
CITY-STATE-ZIP	NORTH LAUDERDALE FL 33068	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DAWSON, MELVIN	
STREET ADDRESS	PO BOX 571129	
CITY-STATE-ZIP	MIAMI FL 33257	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MARTIN, TALMADGE	
STREET ADDRESS	3280 NW 18TH STREET	
CITY-STATE-ZIP	FORT LAUDERDALE FL 33311	
TITLE	SD	<input type="checkbox"/> Delete
NAME	MARTIN, SAMANTHA	
STREET ADDRESS	3940 NW 31ST TERRACE	
CITY-STATE-ZIP	LAUDERDALE LAKES FL 33309	
TITLE	SD	<input type="checkbox"/> Delete
NAME	MARTIN, RENEE	
STREET ADDRESS	3280 NW 18TH STREET	
CITY-STATE-ZIP	FORT LAUDERDALE FL 33311	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	U00000725191	
CITY-STATE-ZIP	05/03/07-80012-013 70.00	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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: Shirley Martin Shirley MARTIN, Dir.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/07

(754) 366-4885