

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000000558

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** SANTA MUZIK WORKS PRODUCTION & TRAINING ACADEMY, INC.

**Current Principal Place of Business:**

2604 MAYO ST  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

2604 MAYO ST  
HOLLYWOOD, FL 33020

**New Mailing Address:**

**FEI Number:** 04-3804248

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROWN, ROWAN A  
2604 MAYO ST  
HOLLYWOOD, FL 33020 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: DP  
Name: BROWN, ROWAN A  
Address: 2604 MAYO ST  
City-St-Zip: HOLLYWOOD, FL 33020

Title: DV  
Name: BROWN, TONEITA  
Address: 2604 MAYO ST  
City-St-Zip: HOLLYWOOD, FL 33020

Title: DS  
Name: BROWN, NICKEITA  
Address: 2604 MAYO ST  
City-St-Zip: HOLLYWOOD, FL 33020

I hereby 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 all other like empowered.

SIGNATURE: ROWAN A BROWN

MR

03/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date