2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008055

Name:

Address: City-St-Zip:

Entity Name: REVOLUTIONS DANCE INC

FILED Apr 30, 2008 Secretary of State

Littly Nai	ile. KEVOL	O HONS DANCE	I INC.					
Current Principal Place of Business:				New Princ	New Principal Place of Business:			
	HURST ST. FL 34698	US						
Current M	ailing Addr	ess:		New Maili	ng Addres	s:		
	HURST ST. FL 34698	US						
FEI Number:	13-4304018	FEI Number A	pplied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of	Current Regist	tered Agent:	Name and	Address	of New Registered Agent:		
	R, AMIE O HURST ST , FL 34698	US						
	named entit e of Florida.	/ submits this sta	atement for the p	urpose of changing i	ts registere	d office or registered agent, or	both,	
SIGNATUR	RE:							
	Electro	onic Signature o	f Registered Age	nt		Date		
OFFICER	S AND DIRE	CTORS:		ADDITION	S/CHANG	ES TO OFFICERS AND DIREC	CTORS:	
Title: Name: Address: City-St-Zip:				Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	FISHINGER, 2909 GULF T) Delete AMIE O O BAY BLVD. K201 R, FL 33759 US		Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	LAFLAM, KEY 934 VALLEY			Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	DIR. KELLEHER, 13903 FULLE TAMPA, FL	RTON DR.		Title: Name: Address: City-St-Zip:		() Change () Addition		
Title:) Delete		Title:	DIR.	() Change (X) Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

PAOLO, SERGIO

CRYSTAL BEACH, FL 34681 US

P.O. 975

SIGNATURE: AMIE O. FISHINGER V 04/30/2008