2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002046

City-St-Zip: COCONUT CREEK, FL 33073

FILED Jul 11, 2008 Secretary of State

DOCON	1L141#1407000020 4 0	Secretary of State	
Entity Nai	me: THE NAKED STAGE, INC.		
Current Principal Place of Business:		New Principal Place of Business:	
8177 GLAI STE 209 BOCA RA	DES RD TON, FL 33434		
Current Mailing Address:		New Mailing Address:	
8177 GLAI STE 209 BOCA RA	DES RD TON, FL 33434		
	: 20-5092777 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the corporation di	FEI Number Not Applicable () Certificate of Status Desired ()	
	Address of Current Registered Agent	•	
	DES RD TON, FL 33434 US	ne purpose of changing its registered office or registered agent, or botl	h.
	e of Florida.	pp	•,
SIGNATUR	RE:		
	Electronic Signature of Registered	Agent Date	_
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO)RS:
Title: Name: Address: City-St-Zip:	PD () Delete AMADEO, ANTONIO 5025 IBIS PLACE COCONUT CREEK, FL 33073	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	VPD () Delete MANZELLI, JOHN 560 NE 108TH ST MIAMI, FL 33161	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name:	SD () Delete AMADEOLI, KATHERINE	Title: SD (X) Change () Addition Name: AMADEO, KATHERINE	

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.

City-St-Zip: COCONUT CREEK, FL 33073

SIGNATURE: ANTONIO AMADEO PD 07/11/2008