

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
May 15, 2012
Secretary of State**

DOCUMENT# N10000001711

Entity Name: FANTASY PROFESSIONAL DEVELOPMENT, INC**Current Principal Place of Business:**200 S STATE ROAD 7
MARGATE, FL 33068**New Principal Place of Business:****Current Mailing Address:**11282 LAKEVIEW DR
CORAL SPRINGS, FL 33071**New Mailing Address:****FEI Number:** 27-1989836**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CACUCCIOLO, ROSALBA
11282 LAKEVIEW DRIVE
CORAL SPRINGS, FL 33071 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
Name: CACUCCIOLO, ROSALBA
Address: 11282 LAKEVIEW DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VPD
Name: SEGOVIA, OSCAR
Address: 11282 LAKEVIEW DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: SD
Name: LOPEZ, VANESSA
Address: 867 N NOB HILL ROAD
City-St-Zip: PLANTATION, FL 33324

Title: TRES
Name: HERNANDEZ, MARIA G
Address: 200 S STATE RD. 7
City-St-Zip: MARGATE, FL 33068 BR

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: ROSALBA CACUCCIOLO

PD

05/15/2012

Electronic Signature of Signing Officer or Director

Date