

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004372

FILED
Apr 21, 2009
Secretary of State

Entity Name: PASTTYMES PRODUCTIONS, INC.

Current Principal Place of Business:

745 NORTHEAST 117 STREET
BISCAYNE PARK, FL 33161

New Principal Place of Business:

360 KIMBERLY LANE
BLUE RIDGE, GA 30513

Current Mailing Address:

360 KIMBERLY LANE
BLUE RIDGE, GA 30513

New Mailing Address:

FEI Number: 65-0608459 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FITZGERALD, DAN
745 NE 117TH STREET
BISCAYNE PARK, FL 33161 US

Name and Address of New Registered Agent:

GERSTEN, JUDY
740 NE 117TH STREET
BISCAYNE PARK, FL 33161 US

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: JUDY GERSTEN

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOWEY, DONALD R
Address: 3611 SW 33 AVENUE
City-St-Zip: HOLLYWOOD, FL 33023

Title: BM () Delete
Name: KOPPEN, ROBERT PA
Address: 700 NE 90TH ST.
City-St-Zip: MIAMI, FL 33138

Title: V () Delete
Name: STONE, LOUISE
Address: 800 NE 137TH ST
City-St-Zip: N MIAMI, FL 33161

Title: T () Delete
Name: HACH, BETTY
Address: 987 NE 96 STREET
City-St-Zip: MIAMI SHORES, FL 33138

Title: T () Delete
Name: KVETKO, JAMES REV
Address: 9823 NE 4 AVENUE
City-St-Zip: MIAMI SHORES, FL 33138

Title: D () Delete
Name: HARRING, DANIEL
Address: 1320 S DINE HIGHWAY
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: DAN FITZGERALD

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date