REINSTATEMENT

Page 1&2

2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
07 JUL -9 AM 7:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000070151

1. Entity Name
CROSS WINDS PRODUCTIONS INC.

REINSTATEMENT 06-07

Principal Place of Business	Mailing Address
60 SALANO PRADO CORAL GABLES, FL 33156	60 SALANO PRADO CORAL GABLES, FL 33156

2. Principal Place of Business	3. Mailing Address
15001 SW 256 ST. Suite, Apt. #, etc.	15001 SW 256 ST Suite, Apt. #, etc.
City & State: HOMESTEAD, FL. Zip: 33032 Country: USA	City & State: HOMESTEAD FL Zip: 33032 Country: USA

4. FEI Number: 22-3743428 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FINNERTY, JAMES 60 SALANO PRADO OLD CUTLER BAY CORAL GABLES, FL 33156	* Name: FINNERTY, JAMES Street Address (P.O. Box Number is Not Acceptable): 15001 SW 256 ST City: HOMESTEAD FL Zip Code: 33032

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ 7-6-07
Signature, typed or printed Name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fee

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FINNERTY, JAMES 60 SALANO PRADO OLD CUTLER BAY CORAL GABLES, FL 33156	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition D FINNERTY JAMES 15001 SW 256 ST. HOMESTEAD FL 33032
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FINNERTY, JAMES 60 SALANO PRADO CORAL GABLES, FL 33156	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition P FINNERTY JAMES 15001 SW 256 ST HOMESTEAD FL 33032
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 300106261223 07/17/07--01023--010 **300.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James Finnerty 7-6-07 3052581052
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

JC 7/12

7-6-07 Page 282

Due to change of address
I did not receive 2006 STATEMENT.
2006 REINSTATEMENT please wave

THANK you

James Finnerty

James Finnerty
15001 SW 256 St
Homestead, FL 33032