

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000095050

1. Entity Name
RAPPAPORT ARTS & ENTERTAINMENT, INC.



Principal Place of Business
3970 OAKS CLUBHOUSE DRIVE, SUITE 208
POMPANO BEACH, FL 33069

Mailing Address
3970 OAKS CLUBHOUSE DRIVE, SUITE 208
POMPANO BEACH, FL 33069



03272008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0372864

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

RAPPAPORT, RICHARD W
ADORONO & YOSS, P.A.
700 SOUTH FEDERAL HIGHWAY, SUITE 200
BOCA RATON, FL 33432

**DO NOT WRITE
IN THIS SPACE**

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 _____

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
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000880018
04/15/08-80044-021 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RAPPAPORT, RICHARD W
STREET ADDRESS	3970 OAKS CLUBHOUSE DRIVE, SUITE 208
CITY- ST- ZIP	POMPANO BEACH, FL 33069
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
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STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Richard W. Rappaport*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD WARREN RAPPAPORT, President

Date

Daytime Phone

TEL. (561) 393-5660

MARCH 31 2008