2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000056037

Entity Name: SUNDANCE PROMOTIONS, INC

FILED Jan 12, 2005 Secretary of State

Entity Nam	ie: SUNDANC	LE PROMOTIONS, INC.				
Current Principal Place of Business:			New Princip	New Principal Place of Business:		
8280 WOODSMUR DRIVE WEST PALM BEACH, FL 33412 Current Mailing Address:				8280 WOODSMUIR DRIVE WEST PALM BEACH, FL 33412 New Mailing Address:		
			New Mailing			
8280 WOODSMUR DRIVE WEST PALM BEACH, FL 33412				8280 WOODSMUIR DRIVE WEST PALM BEACH, FL 33412		
FEI Number:	68-0503905	FEI Number Applied For ()	FEI Number Not Applic	able ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and A	Address of	New Registered Agent:	
FINANCIAL FOUNDATIONS, INC. 3150 SANDY RIDGE DR CLEARWATER, FL 33761 US			8280 WÓOD	MARTIN, LAURA M ST 8280 WOODSMUIR DRIVE WEST PALM BEACH, FL 33412 US		
The above in the State		ubmits this statement for the p	ourpose of changing its	registered	office or registered agent, or both,	
SIGNATURE: LAURA MARTIN					01/12/2005	
	Electroni	c Signature of Registered Age	ent		Date	
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	MARTIN, ARMAN 8280 WOODSMI WEST PALM BE V () I	JR DRIVE ACH, FL 33412 Delete	Name: I Address: City-St-Zip: V	MARTIN, ARM 8280 WOODS WEST PALM E		
Name: Address: City-St-Zip:	TRILEGI, BRUNG 915 SARA DRIVE SHALIMAR, FL	≣	Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	ST () I MARTIN, LAURA 8280 WOODSMI WEST PALM BE	JIR DRIVE	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address:	S () I TRILEGI, LUANN 915 SARA DRIVE	Delete I	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURA MARTIN ST 01/12/2005