

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000075723

**FILED**  
**Sep 07, 2010**  
**Secretary of State**

**Entity Name:** LAST MINUTE PRODUCTIONS, INC.

**Current Principal Place of Business:**

9461 S.W. 106TH AVENUE  
MIAMI, FL 33176

**New Principal Place of Business:**

1450 MADURA AVENUE  
SUITE 202  
CORAL GABLES, FL 33146

**Current Mailing Address:**

9461 S.W. 106TH AVENUE  
MIAMI, FL 33176

**New Mailing Address:**

1450 MADURA AVENUE  
SUITE 202  
CORAL GABLES, FL 33146

**FEI Number:** 02-0691491

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PEPE, THOMAS F  
1450 MADRUGA AVENUE  
SUITE 202  
CORAL GABLES, FL 33148 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:** PST  
**Name:** NEMIRE-PEPE, DAMIEN S  
**Address:** 1450 MADURGA AVENUE  
**City-St-Zip:** CORAL GABLES, FL 33146

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** DAMIEN S. NEMIREPEPE

PD

09/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date