## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000131058

Entity Name: HOUSE OF FIRE PRODUCTIONS, INC.

FILED Apr 18, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

10630 WASHINGTON STREET 1261 SW 110 AVENUE

PEMBROKE PINES, FL 33025 US 107

PEMBROKE PINES, FL 33025 US

**New Mailing Address: Current Mailing Address:** 

10630 WASHINGTON STREET 1261 SW 110 AVENUE

PEMBROKE PINES, FL 33025 US PEMBROKE PINES, FL 33025 US

FEI Number: 75-3089993 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GRAVELINE, CHRIS GRAVELINE, CHRIS 10630 WASHINGTON STREET 1261 SW 110 AVENUE

PEMBROKE PINES, FL 33025 107 US

PEMBROKE PINES, FL 33025 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: CHRIS GRAVELINE 04/18/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: GROSS, JASON Name: GROSS, JASON

10630 WASHINGTON STREET SUITE 105 10630 WASHINGTON STREET SUITE 105 Address: Address:

City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: PEMBROKE PINES, FL 33025

VPD Title: Title: () Delete (X) Change ( ) Addition

Name: GRAVELINE, CHRIS Name: GRAVELINE, CHRIS 10630 WASHINGTON STREET SUITE 107 1261 SW 110 AVENUE Address: Address: PEMBROKE PINES, FL 33025 PEMBROKE PINES, FL 33025 City-St-Zip: City-St-Zip:

Title:

( ) Delete Title: () Change () Addition Name:

YOUNGBLOOD, MANDY Name: 10630 WASHINGTON STREET SUITE 105 Address: Address City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip:

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: CHRIS GRAVELINE D 04/18/2005