## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000105362

Entity Name: FCK PRODUCTION, INC

FILED Jul 26, 2004 Secretary of State

Current Principal Place of Business: New Principal Plac	e of Business:
---	----------------

10040 LOQUAT STREET 1440 NE 201 TERRACE MIRAMAR, FL 33025 MIAMI, FL 33179

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

10040 LOQUAT STREET 1440 NE 201 TERRACE MIRAMAR, FL 33025 MIAMI, FL 33179

FEI Number: 20-0284696 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:

BELLABE, KETTYNA FORTUNE, STEPHANY 10040 LOQUAT STREET 1440 NE 201TERRACE MIRAMAR, FL 33025 MIAMI, FL 33179

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: STEPHANY FORTUNE 07/26/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

VΡ

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VΡ

Title: ( ) Delete Title: (X) Change ( ) Addition BELLABE, ROSE MICHELLE K FORTUNE, ESTHER A Name: Name: 10040 LOQUAT STREET 1440 NE 201 TERRACE Address: Address:

MIAMI, FL 33179 US City-St-Zip: MIRAMAR, FL 33025 US City-St-Zip:

Title: Title: () Delete (X) Change ( ) Addition Name: BELLABE, ROSE MICHELLE K Name: OU KAKA, KAKA 10040 LOQUAT STREET 10040 LOQUAT ST Address: Address: MIRAMAR, FL 33025 US MIRAMAR, FL 33025 City-St-Zip: City-St-Zip:

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

BELLABE, ROSE MICHELLE K Name: Name: 10040 LOQUAT STREET Address: Address: City-St-Zip: MIRAMAR, FL 33025 US City-St-Zip:

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

BELLABE, ROSE MICHELLE K Name: Name: Address: 10040 LOQUAT STREET Address: City-St-Zip: MIRAMAR, FL 33025 US 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.

Ρ SIGNATURE: ESTHER A. FORTUNE 07/26/2004