

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000131489

**FILED**  
**Feb 13, 2004**  
**Secretary of State**

**Entity Name:** SCHEZEL INTERNATIONAL PRODUCTIONS, INC.

**Current Principal Place of Business:**

803 NW 160 TERRACE  
PEMBROKE PINES, FL 33028

**New Principal Place of Business:**

**Current Mailing Address:**

16300 NE 19 AVE.  
STE C  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

**FEI Number:** 20-0328700      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BARRIGA, GABRIELA  
803 NW 160 TERRACE  
PEMBROKE PINES, FL 33028      US

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

VIZQUEL, SIXELA L  
803 NW 160 TERRACE  
PEMBROKE PINES, FL 33028      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: SIXELA VIZQUEL      02/13/2004  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: BARRIGA, GABRIELA  
Address: 803 NW 160 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SD      (X) Delete  
Name: BARRIGA, GABRIELA  
Address: 803 NW 160 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33028

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: VIZQUEL, SIXELA L  
Address: 803 NW 160 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: SIXELA VIZQUEL      PD      02/13/2004  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date