

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000132340

Entity Name: BUENPASO PRODUCTIONS, INC.

FILED
Jun 04, 2009
Secretary of State

Current Principal Place of Business:

773 4TH AVENUE NORTH
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

1460 CAHOON STREET
OGDEN, UT 84401

New Mailing Address:

FEI Number: 20-0574602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAVEMAN, BERNARD
5160 B NESTING WAY
DELRAY BEACH, FL 33484 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: PSD () Delete
Name: GRAIWER, MANUEL F
Address: 3026 INGLEWOOD BOULEVARD
City-St-Zip: LOS ANGELES, CA 90066

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: KIEL, LINDA
Address: 5160 B NESTING WAY
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: TREA () Change (X) Addition
Name: KIEL, LINDA
Address: 5160 B NESTING WAY
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: SECY () Change (X) Addition
Name: KIEL, LINDA
Address: 5160 B NESTING WAY
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: DIR () Change (X) Addition
Name: KIEL, LINDA
Address: 5160 B NESTING WAY
City-St-Zip: DELRAY BEACH, FL 33484 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LINDA KIEL

PRES

06/04/2009

Electronic Signature of Signing Officer or Director

Date