2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# P04000001964

Entity Name: ACTING UP DOWN AND AROUND INC

Current Principal Place of Business:

12317 SW 204 TERRACE
NA
MIAMI, FL 33177 US

New Principal Place of Business:

Current Mailing Address:

12317 SW 204 TERRACE
NA
MIAMI, FL 33177 US

New Mailing Address:

FEI Number: 52-2422379 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FITZSIMMONDS, CAMILLE S
12317 SW 204 TERRACE
NA
MIAMI, FL 33177 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	FITZSIMMONDS, CAMILLE S	
Address:	12317 SW 204 TERRACE	
City-St-Zip:	MIAMI, FL 33177	
Title:	SEC	( ) Delete
Name:	FITZSIMMONDS, LILLIAN	
Address:	12317 SW 204 TERRACE	
City-St-Zip:	MIAMI, FL 33177	
Title:	DIR	( ) Delete
Name:	JOHNSON, JOYCE	
Address:	690 EAST 52ND STREET	
City-St-Zip:	BROOKLYN, NY 11203	
Title:	DIR	( ) Delete
Name:	HARRIS, FRAN	
Address:	725 NE 166 ST #4	
City-St-Zip:	MIAMI, FL 33162	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: CAMILLE FITZSIMMONDS MRS 04/30/2004

Electronic Signature of Signing Officer or Director — Date