

P04 0000 89368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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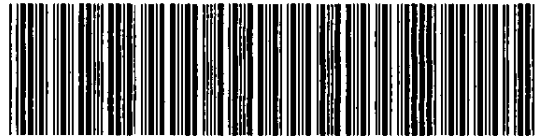
(Business Entity Name)

(Document Number)

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PA Change

B. CONNELL JAN 08 2010

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Hollyhood Productions, Inc.  
Name of Corporation

DOCUMENT NUMBER: P040000 893 68

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adel L. Morales

Name of Contact Person

Hollyhood Productions, Inc.

Firm/Company

1876 79<sup>th</sup> Street Causeway

Address

North Bay Village, FL 33141

City/State and Zip Code

hollyhoodprod@optonline.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adel L. Morales

Name of Contact Person

at ( 917 ) 226-2957

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Hollyhood Productions, Inc.
2. The principal office address: 1876 79<sup>th</sup> Street Causeway \* AN E-MAIL WAS  
North Bay Village, FL 33141 sent requesting
3. The mailing address (if different): 890 E. 241<sup>st</sup> St this address be  
Bronx, NY 10466 changed, also. \*
4. Date of incorporation/qualification: 6/9/04 Document number: P04000089368
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Adel L. Morales

1876 79<sup>th</sup> Street Causeway

North Bay Village, FL 33141

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Adel L. Morales (same)

9583 Southwest 46<sup>th</sup> Terrace

P.O. Box NOT acceptable

OCALA, FL 34476

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Adel L. Morales

Signature of an officer or director

Adel L. Morales

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Adel L. Morales

Signature of Registered Agent

12/29/09

Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*