

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000162116

**FILED**  
**Apr 15, 2005**  
**Secretary of State**

**Entity Name:** INSPIRING KIDS PRODUCTIONS, INC.

**Current Principal Place of Business:**

1000 SPOONBILL CIRCLE  
WESTON, FL 33326

**New Principal Place of Business:**

136 BUTLER ROAD  
BRANDON, FL 33511

**Current Mailing Address:**

1000 SPOONBILL CIRCLE  
WESTON, FL 33326

**New Mailing Address:**

136 BUTLER ROAD  
BRANDON, FL 33511

**FEI Number:** 20-2566099

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SILVERMAN, MARK  
5550 GLADES ROAD  
SUITE 400  
BOCA RATON, FL 33431 US

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

FUCCA, JACQUE  
11026 PEPPERSONG DRIVE  
RIVERVIEW, FL 33569 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:** JACQUE FUCCA

04/15/2005

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** PLOUFF, AMIELLE  
**Address:** 1000 SPOONBILL CIRCLE  
**City-St-Zip:** WESTON, FL 33326 US

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

**Title:** P (X) Change ( ) Addition  
**Name:** PLOUFF, AMIELLE  
**Address:** 136 BUTLER ROAD  
**City-St-Zip:** BRANDON, FL 33511 US

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:** AMIELLE PLOUFF

P

04/15/2005

Electronic Signature of Signing Officer or Director

Date