2006 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 19, 2006 8:00 am
Secretary of State
04-03-2006 90397 012 ***150.00

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1. Entity Name
S L & P PRODUCTIONS, INC.

UU01U725

01182006 Chg-P CR2E034 (11/05)

Principal Place of Business	Mailing Address
~~3380 SHERIDAN STREET~~ ~~HOLLYWOOD, FL 33021~~	~~3380 SHERIDAN STREET~~ ~~HOLLYWOOD, FL 33021~~

2. Principal Place of Business	3. Mailing Address
3861 NW 3RD PLACE	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: DEERFIELD BEACH FL	City & State:
Zip: 33442 Country: USA	Zip: Country:

4. FEI Number: 76-0825206 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCHAEFER, PATRICK J 3861 NW 3RD PLACE DEERFIELD BEACH, FL 33442	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Patrick J Schaefer 3-26-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHAEFER, LEE F #14 LINDEN CT FT THOMAS, KY 41075	☒ Delete	D PATRICK J. SCHAEFER 3861 NW 3RD PLACE DEERFIELD BEACH, FL 33442	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FREDRICKS, SKIP 1746-F S VICTORIA AVE #187 VENTURA, CA 93003	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KIELY, KIM 4021 NW 62ND CT COCONUT CREEK, FL 33073	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patrick J Schaefer 3/26/06 954 296-5179
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #