## 2007 FOR PROFIT CORPORATION

## **FILED** Apr 18, 2007 8:00 am Secretary of State

ANNUAL REPURT	
DOCUMENT # P05000146836	

04-18-2007 90178 015 \*\*\*150.00 1. Entity Name LITTLE SHOES PRODUCTIONS, INC. 40067612 Mailing Address Principal Place of Business 715 SW 7TH STREET 715 SW 7TH STREET FORT LAUDERDALE, FL 33315 FORT LAUDERDALE, FL 33315 2. Principal Place of Business - No P.O. Box # 915 NE 10TH Avenue 3. Mailing Address 915 NE 10TH Avenue Suite, Apt. #, etc. Suite, Apt. #, etc. 04072007 CR2E034 (12/06) City & State Pompano Pompano Applied For 4 FEI Number 20-3816173 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 33060 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCARDINO, KAtherine
Street Address (P.O. Box Number is Not Acceptable) SCARPINO, KATHERINE M 715 SW 7TH STREET FORT LAUDERDALE, FL 3315 915 NE 10TH Avenue Zip Code 33000 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, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaion Financino \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. Change ☐ Addition TITLE TITLE Delete Scarpino, Katherine M 915 NE LOTH Avenue SCARPINO, KATHERINE M NAME NAME STREET ADDRESS STREET ADDRESS 715 SW 7TH STREET CITY-ST-ZIP FORT LAUDERDALE, FL 33315 CITY-ST-ZIP Pompano Beach, FL 33060 Addition TITLE ☐ Channe ☐ Delete HILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ■ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition 1016 Change ☐ Delete THLE NAME NAME STREET ADDRESS STREET ADDRESS DITY-ST-7IP CITY-ST-ZIP ☐ Change ■ Addition Detete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P □ Channe Addition ☐ Delete TITLE HTLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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:

Sca

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT# P05000146836 1. Entity Name LITTLE SHOES PRODUCTIONS, INC. ATTACHMENT Mailing Address

715 SW 7TH STREET 915 NE DTH AVE
FORT LAUDERDALE, FL 23315 33060
POINT IND BESCH, FL Principal Place of Business 715 SW 7TH STREET FORT LAUDERDALE, FL 33315 -40067612 No Chg-P CR2E034 (11/05) 04072007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3816173 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCARPINO, KATHERINE M DO NOT WRITE 715 SW 7TH STREET FORT LAUDERDALE, FL 3315 IN THIS SPACE 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. Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE SCARPINO, KATHERINE M NAME STREET ADDRESS 715 SW 7TH STREET FORT LAUDERDALE, FL 33315 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 directly 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 changed, or on an attachment with an address, with all other like empowered.

Date

Daytime Phone #