


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000016336 1. Entity Name STORYWORLD PICTURES, INC.			
Principal Place of Business 9050 PINES BLVD, SUITE 386 PEMBROKE PINES, FL 33024		Mailing Address 9050 PINES BLVD, SUITE 386 PEMBROKE PINES, FL 33024	
6. Name and Address of Current Registered Agent KASTENBAUM, MICHAEL 9050 PINES BLVD, SUITE 386 PEMBROKE PINES, FL 33024		4. FEI Number 20-4253668	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>		000000958727 09/02/08-90004-003 150.00	
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, T KASTENBAUM, MICHAEL 9050 PINES BLVD, SUITE 386 PEMBROKE PINES, FL 33024		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS GOLOMB, ERIC 9050 PINES BLVD, SUITE 386 PEMBROKE PINES, FL 33024		
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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: <i>Michael Kastebaum</i> <i>Michael Kastebaum</i> 8/27/08 310-279-9376 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			