

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000042013

Entity Name: MASQUE PRODUCTIONS, INC.

FILED  
Apr 07, 2007  
Secretary of State

## Current Principal Place of Business:

PO BOX 4056  
WEST PALM BEACH, FL 33402

## New Principal Place of Business:

800 OCEAN DRIVE#201  
JUNO BEACH, FL 33408

## Current Mailing Address:

PO BOX 4056  
WEST PALM BEACH, FL 33402

## New Mailing Address:

800 OCEAN DRIVE  
JUNO BEACH, FL 33408

FEI Number: 20-4589935

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NAPOLEON, MICHAEL J ESQ  
ONE CLEARLAKE CENTRE SUITE 1504  
250 AUSTRALIAN AVENUE SOUTH  
WEST PALM BEACH, FL 334015016 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LA VISTA, NANCY  
Address: PO BOX 4056  
City-St-Zip: WEST PALM BEACH, FL 33402

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: LA VISTA, NANCY  
Address: 800 OCEAN DRIVE  
City-St-Zip: JUNO BEACH, FL 33408

Title: D ( ) Change (X) Addition  
Name: SCHWARTZ, MARK S  
Address: 800 OCEAN DRIVE # 201  
City-St-Zip: JUNO BEACH, FL 33408

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: NANCY LA VISTA

D

04/07/2007

Electronic Signature of Signing Officer or Director

Date