

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000059882

1. Entity Name
POMPEE PRODUCTIONS, INC.



Principal Place of Business
1077 NE 157TH TERRACE
NORTH MIAMI BEACH, FL 33162

Mailing Address
1077 NE 157TH TERRACE
NORTH MIAMI BEACH, FL 33162

FILED

Jun 23, 2008 08:00 AM
Secretary of State



06202008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4775951

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

POMPEE, JEAN ARMAND
1077 NE 157TH TERRACE
NORTH MIAMI BEACH, FL 33162

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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 JEAN A. POMPEE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

06/23/08-80001-018 150.00
06-20-08

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD
NAME POMPEE, JEAN
STREET ADDRESS 1077 NE 157TH TERRACE
CITY-ST-ZIP NORTH MIAMI BEACH, FL 33162

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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:

JEAN A. POMPEE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-20-08

Date

Daytime Phone #