## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 21, 2008 8:00 am Secretary of State DOCUMENT # P07000021242 04-21-2008 90073 010 \*\*\*158.75 DANIEL S. WHITEBOOK PRODUCTIONS, INC. 40074567 Principal Place of Business Mailing Address 4700 NW 132 ST 4700 NW 132 ST OPA LOCKA, FL 33054 OPA LOCKA, FL 33054 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01102008 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 8447978 Not Applicable Country \$8.75 Additional. 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WHITEBOOK, DANEIL S Street Address (P.O. Box Number is Not Acceptable) 4700 NW 132 ST OPA LOCKA, FL 33054 Zip Code City 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 age SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PSD 🕾 ☐ Change ☐ Addition TITLE ☐ Delete TITLE WHITEBOOK, DANIEL S NAME NAME STREET ADDRESS STREET ADDRESS 4700 NW 132 ST OPA LOCKA, FL 33054 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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:

**FILED**