## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000040598

FILED Apr 28, 2009 Secretary of State

Entity Name: CROSS ROADS TICKET CENTER LAW OFFICE OF KIRK A. BARROW & DAWN MORRISON, P.A.

**Current Principal Place of Business: New Principal Place of Business:** 6491 SUNSET STRIP SUITE 8 SUNRISE, FL 33313 **Current Mailing Address: New Mailing Address:** 6491 SUNSET STRIP SUITE 8 SUNRISE, FL 33313 FEI Number: 26-2591236 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KIRK BARROW, P.A. 6491 SUNSET STRIP SUITE 8 SUNRISE, FL 33313 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition BARROW, KIRK Name: Name: 10743 NW 12TH COURT Address: Address: City-St-Zip: PLANTATION, FL 33322 City-St-Zip: Title: Title: () Change () Addition () Delete MORRISON, DAWN Name: Name: 5342 NW 119 TERRACE Address: Address: CORAL SPRINGS, FL 33076 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: KIRK BARROW D 04/28/2009