

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000096198

Entity Name: UP PRODUCTIONS, INC.

FILED
Apr 09, 2009
Secretary of State

Current Principal Place of Business:

2101 SW IMPERIAL STREET
PORT ST. LUCIE, FL 34987

New Principal Place of Business:

Current Mailing Address:

2101 SW IMPERIAL STREET
PORT ST. LUCIE, FL 34987

New Mailing Address:

FEI Number: 26-3600219

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROUPE, GREGORY
2101 SW IMPERIAL STREET
PORT ST. LUCIE, FL 34987 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: P () Delete
Name: TROUPE, GREGORY
Address: 2101 SW IMPERIAL STREET
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: VP () Delete
Name: THOMAS, WILBERT
Address: 2301 NW 27TH TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: S () Delete
Name: BAJAMOUR, TA'AMI
Address: 1201 NW 23RD TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: T () Delete
Name: JENKINS, CLAIRITHA
Address: 2549 WESCHESTER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33407

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: JENKINS, CLARITHA
Address: 2549 WESCHESTER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33407

Title: T () Change (X) Addition
Name: STEPHENS, PAMELA
Address: 1428 SCOTTSDALE ROAD EAST
City-St-Zip: WEST PALM BEACH, FL 33417

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: TA'AMI BAJAMOUR

T

04/09/2009

Electronic Signature of Signing Officer or Director

Date