2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20627

FILED Mar 21, 2007 Secretary of State

Entity Nan	ne: REITHO	PFFER SHOWS, INC.					
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
9022 WIGO GIBSONTO	GINS RD DN, FL 3353	4 US					
Current M	ailing Addr	ess:	New Maili	New Mailing Address:			
	HENSON LI N BRIDGE F VA 22030						
FEI Number:	52-0690094	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
2810 REMI	ALBERT CR INGTON GR SSEE, FL 32	EEN CIRCLE					
The above in the State		submits this statement for the	purpose of changing i	ts registered	office or registered agent, or bot	th,	
SIGNATUR	RE:						
	Electr	onic Signature of Registered A	gent		Date	_	
Election Can	npaign Financ	ng Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P REITHOFFER 19468 CAMP JUPITER, FL	LANE	Title: Name: Address: City-St-Zip:	CEO () REITHOFFER 9022 WIGGIN GIBSONTON,	S ROAD		
Title: Name: Address: City-St-Zip:	REITHOFFER 9022 WIGGI) Delete R, RICHARD, H. NS RD. FL. 33534, 33534	Title: Name: Address: City-St-Zip:				
Title: Name: Address: City-St-Zip:	REITHOFFER 9022 WIGGI) Delete R, MARIANNE, NS RD. FL. 33534, 33534	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	REITHOFFER 154 MONTER		Title: Name: Address: City-St-Zip:	REITHOFFER 154 MONTERI			
Title:	D	X) Delete	Title:	() Change () Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD H. REITHOFFER CEO 03/21/2007

REITHOFFER, BETTE A.,

ROYAL PALM BCH, FL 33411

154 MONTEREY WAY

Name:

Address:

City-St-Zip: