## 2904 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 15, 2004 08:00 AM DOCUMENT # P93000080951 **Secretary of State** SPA-TACULAR PRODUCTIONS, INC. Principal Place of Business Mailing Address 4650 S SEMORAN BOULEVARD 4650 S SEMORAN BOULEVARD **STE 200** STE #200 ORLANDO, FL 32822 US ORLANDO, FL 32822 US CR2E034 (10/03) 01052004 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3214726 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent IVAN, LEFKOWITZ ESQ DO NOT WRITE 430 N MILLS AVE ORLANDO, FL 32803 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title (I applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. vn THLE NAME PORCHENICK, BARBARA 4106 BELL TOWER COURT STREET ADDRESS CITY-ST-ZIP BELL ISLE, FL 32812 \* - U000000005347 **PSTD** TITLE 01/15/04-80049-009 15D.NA PORCHENICK, BERNARD NAME STREET ADDRESS 4106 BELL TOWER COURT BELLE ISLE, FL 32812 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE GITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE MARKE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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

SIGNATURE:

**FILED**