

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000031201

1. Entity Name

HENRY K. PRODUCTIONS INC.



Principal Place of Business

20220 BOCA WEST DRIVE
THE COVE 903
BOCA RATON, FL 33434 US

Mailing Address

20220 BOCA WEST DRIVE
THE COVE 903
BOCA RATON, FL 33434 US



04172006

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0497986

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KARYO, MAX
370 CAMINO GARDENS BLVD
STE 329
BOCA RATON, FL 33432

**DO NOT WRITE
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 if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

U000000527135
05/04/06-80102-013 150.00

10.

OFFICERS AND DIRECTORS

TITLE

PD

NAME

KARYO, HENRY

STREET ADDRESS

20220 BOCA WEST DRIVE

CITY- ST- ZIP

BOCA RATON, FL 33434

TITLE

D

NAME

KARYO, MAURICE

STREET ADDRESS

20220 BOCA WEST DRIVE

CITY- ST- ZIP

BOCA RATON, FL 33434

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

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NAME

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CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

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IN THIS SPACE**

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 filers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAURICE G KARYO

Date

Daytime Phone #

4/17/06