

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005 8:00 am
Secretary of State

01-28-2005 90017 019 ***150.00

DOCUMENT # P94000053324 1. Entity Name DONNA TUCCI'S SCHOOL OF DANCE, INC.			
Principal Place of Business 10241 SOUTHERN BLVD ROYAL PALM BEACH, FL 33411		Mailing Address 10241 SOUTHERN BLVD ROYAL PALM BEACH, FL 33411	
2. Principal Place of Business 10245 Southern Blvd		3. Mailing Address 10245 Southern Blvd	
Suite, Apt. #, etc. RPB, FL		Suite, Apt. #, etc. RPB, FL	
City, State RPB, FL		City, State RPB, FL	
Zip 33411		Country 33411	
4. FEI Number 65-0512995		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TUCCI, DONNA M 10678 PELICAN DR WELLINGTON, FL 33414		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TUCCI, DONNA M 10678 PELICAN DR WELLINGTON, FL 33414	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 like empowered.			
SIGNATURE: Donna Tucci <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		1/25/05 56195.0053 <small>Date Daytime Phone #</small>	