

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000020855

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: WADE SHOWS INCORPORATED

## Current Principal Place of Business:

16958 US 41 S.  
SPRINGHILL, FL 34610

## New Principal Place of Business:

## Current Mailing Address:

C/O TOVA SHABAN  
2000 TOWN CENTER,STE. 1500  
SOUTHFIELD, MI 480751195

## New Mailing Address:

FEI Number: 59-3308580

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: DP ( ) Delete  
Name: ZAITSHIK, FRANK  
Address: 16958 US HIGHWAY 41 SOUTH  
City-St-Zip: SPRING HILL, FL 34610

Title: DVST ( ) Delete  
Name: ZAITSHIK, MELISSA  
Address: 16958 US HIGHWAY 41 SOUTH  
City-St-Zip: SPRING HILL, FL 34610

Title: 2VP (X) Delete  
Name: ZAITSHIK, GARY  
Address: 16958 US HIGHWAY 41 SOUTH  
City-St-Zip: SPRING HILL, FL 34610

Title: 3VP (X) Delete  
Name: BOSLEY, KEVIN  
Address: 16958 US HIGHWAY 41 SOUTH  
City-St-Zip: SPRING HILL, FL 34610

Title: AT (X) Delete  
Name: BOSLEY, SHEL-LEE  
Address: 16958 US HIGHWAY 41 SOUTH  
City-St-Zip: SPRING HILL, FL 34610

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

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

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: FRANK ZAITSHIK

PRES

01/19/2009

Electronic Signature of Signing Officer or Director

Date