

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000005355

FILED
May 01, 2004
Secretary of State

Entity Name: FLORIDA SYSPRODUCTIONS, INC.

Current Principal Place of Business:

1900 SOUTH TREASURE DRIVE
NO. 9T
MIAMI BEACH, FL 33141

New Principal Place of Business:

1900 SOUTH TREASURE DRIVE
NO. 9T
NORTH BAY VILLAGE, FL 33141

Current Mailing Address:

1900 SOUTH TREASURE DRIVE
NO. 9T
MIAMI BEACH, FL 33141

New Mailing Address:

1900 SOUTH TREASURE DRIVE
NO. 9T
NORTH BAY VILLAGE, FL 33141

FEI Number: 65-0806729

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDIVIA, SONNIA
1900 S. TREASURE DRIVE
NO. 9T
NORTH BAY VILLAGE, FL 33141 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: PTD () Delete
Name: VALDIVIA, SONNIA
Address: 1900 KENNEDY CAUSEWAY NO. 219
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: VD () Delete
Name: VALDIVIA, JUAN ROSAS
Address: 1900 S TREASURE DRIVE 9T
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: SD () Delete
Name: VALDIVIA, JUAN ROSWALDO
Address: 1900 S TREASURE DR 9T
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: SVD () Delete
Name: ARANIBAR, NORMA
Address: 1402 KENNEDY COURAGE # E19
City-St-Zip: NORTH BAY VILLAGE, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: VALDIVIA, JUAN ROSWALDO
Address: 1900 S TREASURE DR 9T
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: SVD (X) Change () Addition
Name: ARANIBAR, NORMA
Address: 1900 S TREASURE DR # 9 T
City-St-Zip: NORTH BAY VILLAGE, FL 33141

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SONNIA V. VALDIVIA

PTD

05/01/2004

Electronic Signature of Signing Officer or Director

Date