

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000038745

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** MICHAEL VETTOR PRODUCTIONS, INC.

**Current Principal Place of Business:**

8731 WITTENWOOD COVE  
ORLANDO, FL 328365527

**New Principal Place of Business:**

W126N6310 PARKWAY DRIVE  
MENOMONEE FALLS, WI 53051

**Current Mailing Address:**

8731 WITTENWOOD COVE  
ORLANDO, FL 328365527

**New Mailing Address:**

W126N6310 PARKWAY DRIVE  
MENOMONEE FALLS, WI 53051

**FEI Number:** 59-3509032

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VETTOR, MICHAEL  
8731 WITTENWOOD COVE  
ORLANDO, FL 328365527 US

**Name and Address of New Registered Agent:**

VETTOR, MICHAEL  
W126N6310 PARKWAY DRIVE  
MENOMONEE FALLS, FL 53051 US

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

02/21/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: VETTOR, MICHAEL  
Address: W126N6310 PARKWAY DRIVE  
City-St-Zip: MENOMONEE FALLS, WI 53051

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL VETTOR

PD

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date