## 2006 FOR PROFIT CORPORATION

SIGNATURE:

## Sep 06, 2006 8:00 am Secretary of State ANNUAL REPORT 09-06-2006 90033 032 \*\*\*150 00 DOCUMENT # P98000106516 1. Entity Name CHARISMA PRODUCTIONS, INC. RACOCUUO Principal Place of Business Mailing Address 101 N OCEAN DR 101 N OCEAN DR #683 HOLLYWOOD BEACH, FL 33019 HOLLYWOOD BEACH, FL 33019 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 08222006 Chg-P CR2E034 (11/05) City & State City & State Applied For 4. FEI Number 65-0885275 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPECTOR, JOEL 101 N OCEAN DR Street Address (P.O. Box Number is Not Acceptable) SUITE NO 683 HOLLYWOOD, FL 33019 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 familial with, and accept the obligations of registered agent. SIGNATURE. Signature, typed (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE ■ Addition NAME SPECTOR, JOEL NAME STREET ADDRESS 101 N OCEAN DR STE 683 STREET ADDRESS HOLLYWOOD, FL 33019 CITY-ST-ZIP CITY-ST-ZIP THLE ☐ Delete ☐ Change TITLE □ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - S1 - 7IP ☐ Detete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP 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 like

**FILED** 



## Charisma Productions, Inc.

101 N. Ocean Dr., Suite #683 • Hollywood Beach, Florida 33019 • (954) 921-0990 ext 7683 • Fax: (954) 920-9480

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