SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 16 AM 10:22

DOCUMENT # **P93000060937 (8)**

1. Corporation Name
ENVISAGE MEDIA PRODUCTION INC.

Principal Place of Business	Mailing Address
3281 3RD AVE. N.W. NAPLES FL 33964	3281 3RD AVE. N.W. NAPLES FL 33964

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/25/1993	3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0439479	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees

2. Principal Place of Business	2a. Mailing Address
21 667 104TH AVE. N.	26 667 104TH AVE. N.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 NAPLES, FLORIDA	City & State 28 NAPLES, FLORIDA
Zip 24 33963 Country 25	Zip 29 33963 Country 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PERLMANN, CHARLES 3281 3RD AVE. N.W. NAPLES FL 33964	81 Name CHARLES PERLMANN 82 Street Address (P.O. Box Number is Not Acceptable) 667 104TH AVE. N. 83 84 City NAPLES, FL 85 Zip Code 33963

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when necessary) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	PERLMANN, CHARLES	12 NAME	
STREET ADDRESS	3281 3RD AVE NW	13 STREET ADDRESS	
CITY ST ZIP	NAPLES FL	14 CITY ST ZIP	
TITLE	T	21 TITLE	☐ Change ☐ Addition
NAME	PATTERSON, FRANK	22 NAME	
STREET ADDRESS	524 58TH ST	23 STREET ADDRESS	
CITY ST ZIP	SARASOTA FL	24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: CHARLES PERLMANN 6/12/95 (813)566-8828
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

010431 CP