

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000098087 (6)**

1. Corporation Name

RPM PRODUCTIONS, INC.



Principal Place of Business

**2291 WINSLOW CIRCLE
CASSELBERRY FL 32707**

Mailing Address

**2291 WINSLOW CIRCLE
CASSELBERRY FL 32707**

3. Date Incorporated or Qualified
12/29/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

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**

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

**CAPITAL CONNECTION, INC.
417 E. VIRGINIA ST, SUITE 1
TALLAHASSEE FL 32301**

81 Name

JORDAN F. CAMECKER

82 Street Address (P.O. Box Number is Not Acceptable)

202 Lookout Place, Suite 110

83

84 City

Maitland

FL

85 Zip Code

32751

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

JORDAN F. CAMECKER

Jordan F. Camenker

2/9/96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
D	GLANER, KIM	2291 WINSLOW CIRCLE	CASSELBERRY FL 32707	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
P/D	STERLING L GLANER	24 FULTON PLACE	PALM COAST FL 32137	<input type="checkbox"/>
T/S/D	KIM GLANER	2291 WINSLOW CIR	CASSELBERRY FL 32707	<input checked="" type="checkbox"/>
V/D	KEVIN O'CONNOR	629 E. LIVINGSTON ST	ORLANDO FL 32803	<input type="checkbox"/>
V/D	L. THOMAS WOOTTON	2610 N.W. 69th TERR	GAINESVILLE FL 32606	<input type="checkbox"/>
V/D	DOUGLAS PAUL	6 PEPPER RD	TOWACO NJ 07082	<input type="checkbox"/>
D	LINELL WOOTTON-MIKELL	1820 VIA CONTESSA	WINTER PARK FL 32789	<input type="checkbox"/>

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)(k), 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 as an attachment with an address.

SIGNATURE:

Kim Glaner **KIM GLANER**

2/9/96

407-260-8241

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

CR2E034 (12/95)