

FILE NOW: FILING FEE AFTER: MAY 1ST IS \$550.00

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5/11/98  
Sec 9

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Mar 13 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000081660 (7)  
1. Corporation Name  
ANIMASTERS AND EDITMASTERS, INC.



Principal Place of Business: 925 LA SALLE AVE ORLANDO FL 32803  
Mailing Address: 925 LA SALLE AVE ORLANDO FL 32803

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 1622 WIND WILLOW RD  
2a. Mailing Address: 1622 WIND WILLOW RD  
21. Suite, Apt. #, etc.  
22. City & State: ORLANDO FL  
23. Zip: 32809  
24. Country: 25. Country: 26. City & State: ORLANDO FL  
27. Zip: 32809  
28. Country: 29. Country: 30. Country:

3. Date Incorporated or Qualified: 09/22/1997  
4. FEI Number: 59-3472644  
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 owes or has paid the current year Intangible Personal Property Tax due June 30:  Yes  No

9. Name and Address of Current Registered Agent: WYATT, CYNTHIA 925 LA SALLE AVE ORLANDO FL 32803  
10. Name and Address of New Registered Agent: CYNTHIA STACY 1622 WIND WILLOW ROAD ORLANDO FL 32809  
b1. Name: CYNTHIA STACY  
b2. Street Address (P.O. Box Number is Not Acceptable): 1622 WIND WILLOW ROAD  
b3. City: ORLANDO FL  
b4. City: ORLANDO FL  
b5. Zip Code: 32809

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: Cynthia Stacy  
DATE: 1/22/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D	WYATT, CYNTHIA 925 LA SALLE AVE ORLANDO FL 32803	1.1 TITLE: <input type="checkbox"/> DELETE	1.2 NAME: CYNTHIA STACY PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D	STACY, ROBERT 4868 E MICHIGAN #8 ORLANDO FL 32812	2.1 TITLE: <input type="checkbox"/> DELETE	2.2 NAME: ROBERT STACY DIR/VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: <input type="checkbox"/> DELETE		3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: <input type="checkbox"/> DELETE		4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: <input type="checkbox"/> DELETE		5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: <input type="checkbox"/> DELETE		6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I hereby certify that the information supplied with this filing 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: Cynthia Stacy  
DATE: 1/22/98 (401) 251-0120

CR2E034 (10/97)