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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90097 009 ***150.00

DOCUMENT #	P98000066426
1 Comparation Name	1 OCCOOC IEC

AFI/FILMWORKS, INC.

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Principal Place	e of Business	Mailing Address						IIBIU BIII IBBI
6333 SUNSET DR. 6333 SUNSET DR. MIAMI FL 33143 MIAMI FL 33143						DO NOT WRITE IN THI	S SPACE	
						3. Date Incorporated or Qualifed		
						07/27/1998		Į
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	Apr	olied For
21	acc of Daymos	26				65-0853910	<u> </u>	Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					\$8.75 A	dditional
22		27				- 5 - Certificate of Status Desired	Fee Rec	quired
City & State	е	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes the current year In		_
24	25	29 3	<u>o</u>			Personal Property Tax.		□ No
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Registered	d Agent	
DAN	DALL MULIARA			81	Name			
1	DALL, WILLIAM			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
1	S SUNSET DR.							
MIAP	MI FL 33143			83			•	
			ŀ	84	City		85 Zip C	ode
<u> </u>]			F	—. i	
office or r	egistered agent, or both, in the Sta	0502 and 607.1508, Florida Statutes ate of Florida. Such change was aut igations of, Section 607.0505, Floric	honzed	bv t	-named corpo he corporation	ration submits this statement for the purpose on's board of directors. I hereby accept the appears	ointment as reg	pistered
SIGNATURE							<u> </u>	\
	Signature, typed or printed name of registered	*		Agent	signature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
12.		AND DIRECTORS DELETE	13.	15		·	Change	Addition
TITLE	DP CTCVT	C Pereic	1.2 NA			7. *		
NAME	MINOR, STEVE		1		ADDRESS		,	1
STREET ADDRESS	6333 SUNSET DR.				Ì	•	20	
CITY-ST-ZIP	MIAMI FL 33143	☐ DELETE	1.4 CIT		- 219		Change	Addition
TITLE	DVS		2.2 NA		ļ			_
NAME	RANDALL, WILLIAM				ADDRESS			
STREET ADORESS	6333 SUNSET DR. MIAMI FL 33143		2.4 CI			سىنى ئىسىنى ئىسىچىدى باردىدى	—— — ————	
CITY-ST-ZIP	MIMMI PL 33143	☐ DELETE	31111		· ZIF		Change	Addition
NAME			3.2 NA			•	—. *	
STREET ADDRESS					ADDRESS			
			3.4. Cr					
CITY-ST-ZIP	<u> </u>	☐ DELETE	4.1 TIT				☐ Change	Addition
NAME			4. 2 N	AME			•	
STREET ADDRESS			4.3 ST	REET	ADDRESS			
CITY-ST-ZIP			4.4 CIT					
TITLE		☐ DELETE	5.1 TIT				☐ Change	Addition
NAME			5.2 NA	ME			:	
STREET ADDRESS			53 ST	REET	ADDRESS			
CITY-ST-ZIP			5,4 CIT	TY-ST	-ZIP			
TITLE		☐ DELETE	6,1 T(T	ſΈ			Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6 3 ST	REET.	ADDRESS			
CITY ST 7/D			6.4 CFT	TY-ST	-ZiP			

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 with all other like empowered.

SIGNATURE:

William G RANDAI