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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name 370319

(6)

THREE ARTS PRODUCTIONS, INC.

## FILED May 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 25 NORTH PINEAPPLE AVENUE 25 NORTH PINEAPPLE AVENUE SARASOTA FL 34236 SARASOTA FL 34236 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/25/1970 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1562038 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SHEA, JOHN J. J 720 S ORANGE AVE 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34236 83 84 City 85 Zip Code 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change Addition TITLE Turoff, Robert 1.2 NAME 25 NO PINEAPPLE AVE STREET ADDRESS 1.3 STREET ADDRESS SARASOTA, FL 00000 CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change \_\_\_ Addition TITLE 2.1 7171.6 TUROFF, BENJAMIN M. 2.2 NAME NAME 25 N. PINEAPPLE AVE. STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 THE TUROFF, ROBERTA NAME 3.2 NAME 25 NORTH PINEAPPLE AVE. STREET ADDRESS 3.3 STREET ADDRESS **SARASOTA FL** CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE Change Addition NAME Suplee, T. Raymond(asst) 4. 2 NAME 1770 WOOD STREET STREET ADDRESS 4.3 STREET ADDRESS SSRASOTA FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE turoff, kyle e. NAME 5.2 NAME 25 N. PINEAPPLE AVE. STREET ADDRESS 5.3 STREET ADDRESS Sarasota Fl 5.4 City - St - ZiP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITL€ NAME antolik, felicia 6.2 NAME STREET ADDRESS 25 N. PINEAPPLE AVE. 6.3 STREET ADDRESS SARASOTA FL 6.4 CITY - ST - 71P CITY-ST-ZIP

14. Thereby certify that the information supplied with his filing does not quelify indicated on this annual report or supplemental innual report in true and according or director of the corporation or the receiver or trustee empowered to Block 12 or Block 13 if changed, or or an attachment with an anothers. the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that and that my signature shall have the same legal effect as if made under oath; that I am an specific this report as required by Chapter 607, Florida Statutes; and that my name appears in