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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # 522543

(8)

**BLUE FILM CORPORATION** 

Principal Place of Business	Mailing Address
18160 COLLINS AVENUE	18160 COLLINS AVENUE
MIAMI BEACH FL 33160	MIAMI BEACH FL 33160

FILED Feb 06 1998 8:00am Secretary of State



13160 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/21/1976 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-1730345 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Dosired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be  $\Box$ 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 25 29 24 30 Personal Property Tax due June 30, 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LABATON, ISAAC 1935 N.E. 193RD STREET Street Address (P.O. Box Number is Not Acceptable) 82 NORTH MIAMI BCH FL 33162 83 84 City Zip Code Fl 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 (NOTL: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. PĎ DELETE 1.1 TITLE Change Addition TITLE LABATON, ISAAC 1.2 NAME NAME 1935 N.E. 193RD ST. 1.3 STREET ADORESS STREET ADDRESS NORTH MIAMI BCH FL CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 2.1 1111.6 LABATON, MICHAEL NAME 2.2 NAME 1935 N.E. 193RD ST. STREET ADDRESS 2.3 STREET ADDRESS NORTH MIAMI BCH FL CITY-ST-ZIP 2 4 CITY-\$1-ZIP DELETE Change Addition TITLE 3.1 TITLE LABATON, SANDY N. NAME 3.2 NAME 1935 N.E. 193RD ST. STREET ADDRESS 3.3 STREET ADDRESS NORTH MIAMI BCH FL 3.4. CITY - ST- ZIP CITY-ST-ZIF DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 1111.6 TITLE NAME 5.2 NAME 53 STREET ADDRESS STREET ADDRESS 54 CHY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change ■ Addition NAME 6.2 NAME

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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted 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.

6.3 STREET ADDRESS 6.4 CHY-ST-ZIP

SIGNATURE: So am Fabration

STREET ADDRESS

ISAAC LABATON

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