

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TAMARA H. MATHIAS
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

95 MAY -1 PM 4:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000006411 (2)

1. Corporation Name

SYNERVISION PRODUCTIONS, INC.

2. Principal Office Location
444 BRICKELL AVE., #900
MIAMI FL 33131

3. Mailing Address
444 BRICKELL AVE., #900
MIAMI FL 33131

8000001471738
-05/02/95--01151--014
***200.00 ***200.00
DO NOT WRITE IN THIS SPACE

3. Date of Incorporation of Corporation 12/15/1994
3a. Date of Last Report

2. Principal Office Location
21

3. Mailing Address
26

4. FEI Number
65-0368099

Annual Fee
Not Applicable

22

27

5. Certificate of Status Granted ☐ \$8.75 Additional Fee Required

23

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6. Election Campaign Financing Fund Fund Contribution ☐ \$5.00 May Be Added to Fees

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6. This corporation has submitted to the Department for review its Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

81 Name

82 Street Address, P.O. Box Number, or Post Office Box

83

84 City

FL

85

Zip Code

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing information is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida. I hereby accept the appointment as registered agent of the corporation named above.

12. Signature of Agent

TANYA M. VILLAR
SPECIAL ASSISTANT SECRETARY

4-28-95

13. Name of Agent

PD
GREENBERG, DAVID
444 BRICKELL AVE., #900
MIAMI FL 33131

14. Name of Agent

15. Name of Agent

16. Name of Agent

17. Name of Agent

18. Name of Agent

19. Name of Agent

20. Name of Agent

21. Name of Agent

22. Name of Agent

23. Name of Agent

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26. Name of Agent

27. Name of Agent

28. Name of Agent

29. Name of Agent

30. Name of Agent

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing information is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida. I hereby accept the appointment as registered agent of the corporation named above.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF AGENT OR FILER ON DIRECTOR