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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F94884

RIDDAR PRODUCTION INC. NATURE Connection

Maining Audiess									
36 OSPREY S SAFETY HAR	6T. Bor Fl	38 OSPREY ST. SAFETY HARBOR FL 34695-5323				4			
						3. Date Incorporated or Qualified 08/17/1982		ate of Last R 01/1996	Report
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	<u></u>	T A	pplied For
1 26						59-2524287			ot Applicabl
Suite, Apt 2		Suite, Apt. #, etc.				6. Certificate of Status Desired		\$8.75	Additional equired
City & Sta	ale .	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Cou	ntry	,	8. This corporation has liability for it	ntangible	tax under s	. 199.032.
4	25	29	30				Yes [,
	9. Name and Address of Curr	ent Registered Agent	······································			10. Name and Address of New Reg	istered .	Agent	
	P, ANDERS			81	Name				
38 OSPREY STREET				82	Chront Add	Addrago (B.O. Dou Nillymber in Not Assentable)			
SAFETY HARBOR FL 34895				82 Street Address (P.O. Box Number is Not Acceptable)					
				83					
				84	City		FL	85 Zip	Code
		te of Florida. Such change wigations of, Section 607.0505,	as authorized Florida Stat	d by utes	the corpora	poration submits this statement for the protion's board of directors. I hereby accep	the app	ointment as	registered
SIGNATURE	Signature, lysed or printed name of registered a	nent and title if applicable (f	NOTE: Registerer	i Ano	ent signatura regul	ired when reinstating)	DATE		
12.		ND DIRECTORS	13.	7 7 90	and an Serial to the character	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
TiT(E	P	DELETE	1.1 10	ΓLE				Change	☐ Additio
NAME	ASP, ANDERS		1.2 NA						torond 1 Mary 1170
STREET ADDRESS	AA ACODEV OT				ADDRESS				
CITY-SI-ZIP	SAFETY HARBOR FL								
TITLE	T	DELETE	1.4 CIT 2.1 TIT		1-212		,	Change	Additio
NAME	ASP, KERSTI	E occur			,			C require	I'''I WOYUUO
NINE STREET ADDRESS	AA ARDREV OT		2.2 NA		4				
	SAFETY HARBOR FL		1		ADORESS				
CITY - ST - ZIP TITLE	O'N ETT INNEOTITE	DELETE	2.4 CI		ST-ZIP			1100000	1.2.20
		L. DELETE	3.1 717				:	Change	Addition
NAME			3.2 NA		'				
STREET ADDRESS			3 3 ST	REET	ADDRESS				
CITY - ST - ZIP			3.4. CI		ST-ZIP			B	
TITLE		DELETE	4.1 TIT	'LE				L Change	ijibbA 🔲
NAME			4. 2 N/	AME				\ ~	10/20
STREET ADDRESS			4.3 ST	REET	AODRESS			\ .	$\mathcal{K}_{\mathcal{N}}$
City-St-7iP			4.4 CII	Y-S	T-ZIP				$\mathbf{Y} \mathbf{J} \mathbf{X}$

***165.00 6.4 CITY-ST-ZIP 14. I do 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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TILE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE

THUE

NAME

HILE

NAME

STREET ACCORESS

STREET ADDRESS

CHTY-ST-76

DITY-ST-ZIP

DELETE

DELETE

200002179302 -05/15/97--01008--034

Addition

Addition

☐ Change

FILED

May 06 1997 8:00am

Secretary of State